

Benn »

Chemist & Druggist

FEBRUARY 26 1977

THE NEWSWEEKLY FOR PHARMACY

the message
is Simple.....



Your customers know that Simple Soap contains no perfume, no colouring—just pure, simple soap. They like it. They buy it. Last year sales rose dramatically for the fifth year in succession.

And the new advertising campaign you're about to see is simply the biggest we've ever done. Bigger ads. Brief and to the point. Because we believe the message is really very simple. . . .

Simple Soap Sells

Queen Mother
opens Society
headquarters
at Lambeth

Storage and
safety of
medicines
in the home

£5000 a year
for Irish
managers?

THE INTER-DENS TOOTHBRUSH WILL REACH ALL THE RIGHT PLACES



Dentists are now being told in their professional press of this new Inter-dens development designed with them in mind.

Over 2.75 million major purchasing housewives will see the launch of this quality toothbrush advertised in **Good Housekeeping**, **She**, **Cosmopolitan**, **Family Circle**, **Living** and **Ideal Home**.

The popularity and effectiveness of Inter-dens Gum Massage Sticks are well known. So now with the advice of members of the dental profession comes the newly designed Inter-dens Toothbrush angled to match dental instrumentation.

The compact head with resilient round ended filaments gives the proper cleaning action, reaching all the back and inner tooth surfaces. The balanced handle gives a firm grip to allow thorough cleaning whilst stimulating the gums.

You can recommend the Inter-dens Toothbrush with confidence. Available from your usual wholesalers, or see your Nicholas salesman and ask him for the promotional display material and leaflets. See how Inter-dens sales will bring a smile to your face.

INTER-DENS

for people who really care for their teeth



Inter-dens products for oral hygiene.
Nicholas Laboratories Ltd.,
225 Bath Road, Slough, SL1 4AU.

'Inter-dens' is a trade mark.

1163

Bartex 1977



Polarised Sunglasses



PL 1B
Polarised for boys. Assorted coloured plastic frames.
Retail .65p each.



PL 2G
Polarised for girls. Assorted coloured plastic frames.
Retail .65p each.



PL 3B
Polarised for boys. Assorted coloured plastic frames. 12 pieces per display box.
Retail .65p each.



PL 4G
Polarised for girls. Assorted coloured plastic frames. 12 pieces per display box.
Retail .65p each.

Prices do not include VAT

ALFRED FRANKS & BARTLETT CO. LTD.,

BARTEX HOUSE, 167–185 FRESTON ROAD, LONDON, W10 6TH

From.....

TELEPHONES: 01-960 0922/8

Address.....

TELEGRAMS: ALFRANKO, LONDON, W10 6TH

Tel. No.

Date.....

Delivery.....

SUPER FASHION – POLARISED – PHOTOCHROMATIC

SUPER FASHION			SUPER FASHION		
REFERENCE No.	QUANTITY	RETAIL PRICE	REFERENCE No.	QUANTITY	RETAIL PRICE
F.1		£1.20p each	F.20		£2.75p each
F.2		£1.20p each	F.21		£2.75p each
F.3		£1.55p each	F.22		£2.75p each
F.4		£1.55p each	F.23		£2.75p each
F.5		£1.55p each	F.24		£2.75p each
F.6		£1.55p each	F.25		£2.75p each
F.7		£1.55p each	F.26		£3.00p each
F.8		£1.75p each	F.27		£3.40p each
F.9		£1.75p each	F.28		£3.40p each
F.10		£1.75p each	F.29		£3.40p each
F.11		£1.85p each	F.30		£3.40p each
F.12		£1.85p each	F.31		£3.50p each
F.13		£1.85p each	F.32		£3.50p each
F.14		£1.85p each	F.33		£3.50p each
F.15		£2.00p each	F.34		£3.50p each
F.16		£2.75p each	F.35		£4.00p each
F.17		£2.75p each	F.36		£4.00p each
F.18		£2.75p each	F.37		£4.00p each
F.19		£2.75p each	F.38		£4.00p each

DISPLAY STANDS FASHION MIRROR TOP FREE (see brochure)

POLARISED			PL CLIPOVERS		
PL 1B		65p each	Small		£1.25p each
PL 2G		65p each	Medium		£1.25p each
PL 3B		65p each	Large		£1.25p each
PL 4G		65p each	PL FLIPCLIPS		
PL 180		£1.00p each	Medium		£1.25p each
PL 3018		£2.00p each	Large		£1.25p each
PL 14		£2.00p each	DISPLAY STANDS NDS		
PL 837		£2.25p each	Mirror Top No. 1 Stand		Free (see brochure)
PL 215		£2.25p each	PHOTOCHROMATIC		
PL 1052		£2.75p each	900/K		£5.50p each
PL 1054		£2.75p each	208		£5.50p each
PL 10058		£2.75p each	SB 5603		£5.50p each
PL 10071		£2.75p each	556		£7.50p each
PL 244		£2.75p each	466		£7.50p each
PL 3021		£3.00p each	LESS USUAL TRADE DISCOUNTS		
PL 3022		£3.00p each	Cases available on request.		
PL 4084		£4.50p each	Please state whether pieces or dozens		
PL 35576		£4.50p each			
PL 35673		£4.50p each			

ALL PRICES EXCLUDE V.A.T.

Signed.....

Do not forget we advertise on the buses, in the press and on the radio

WITHOUT OBLIGATION

WINTER FASHION

The winter season is a time of elegance and style. This collection features a variety of garments designed to keep you warm and fashionable. From cozy sweaters to sophisticated coats, there is something for everyone. The designs are inspired by the latest trends, ensuring you stay ahead of the fashion curve. The color palette is rich and varied, offering a range of options to suit your personal style. The fabrics are high-quality and durable, ensuring your garments will last for years to come. The fit is tailored and flattering, designed to enhance your natural beauty. The overall aesthetic is one of timeless elegance and sophisticated style.

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BarTex

Super Fashion Sunglasses...

... to be seen in Summer
and to see Summer in





F1 Retail £1.20 each



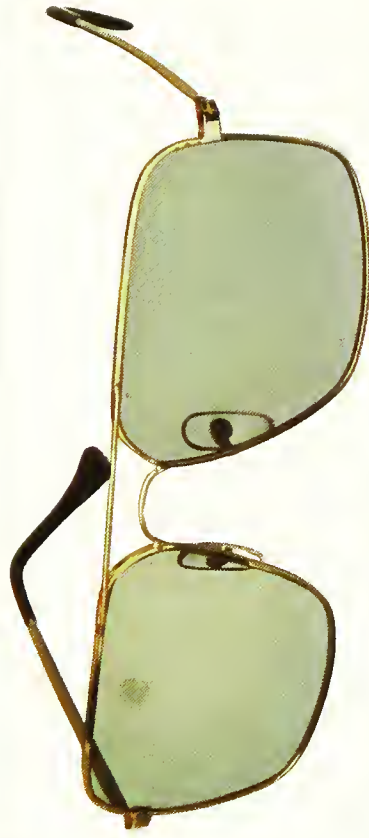
F4 Retail £1.55 each

Tempered Lenses



F2 Retail £1.20 each

Tempered Lenses



F5 Retail £1.55 each

Tempered Lenses



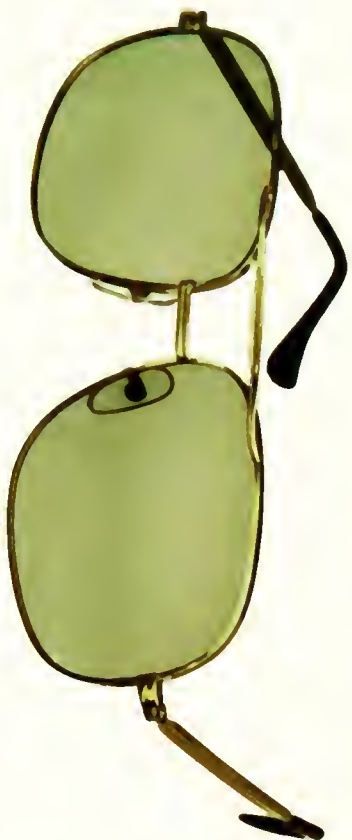
F3 Retail £1.55 each

Tempered Lenses



F6 Retail £1.55 each

Tempered Lenses



F7 Retail £1.55 each

Tempered Lenses



F8 Retail £1.75 each

Tempered Lenses



F9 Retail £1.75 each

Tempered Lenses



F10 Retail £1.75 each

Tempered Lenses



F11 Retail £1.85 each



F12 Retail £1.85 each



F15 Retail £2.00 each

Tempered Lenses



F13 Retail £1.85 each



F16 Retail £2.75 each

Tempered Lenses



F14 Retail £1.85 each



F17 Retail £2.75 each

Tempered Lenses



F18 Retail £2.75 each

Tempered Lenses



F21 Retail £2.75 each

Tempered Lenses



F19 Retail £2.75 each

Tempered Lenses



F22 Retail £2.75 each

Tempered Lenses



F20 Retail £2.75 each

Tempered Lenses



F23 Retail £2.75 each

Tempered Lenses



F24 Retail £2.75 each

Tempered Lenses



F25 Retail £2.75 each

Tempered Lenses



F28 Retail £3.40 each

Tempered Lenses



F27 Retail £3.40 each

Tempered Lenses



F26 Retail £3.00 each

CR39 Lenses



F29 Retail £3.40 each

Tempered Lenses



F30 Retail £3.40 each

Tempered Lenses



F33 Retail £3.50 each

CR39 Lenses



F31 Retail £3.50 each

Tempered Lenses



F34 Retail £3.50 each

CR39 Lenses



F32 Retail £3.50 each

Tempered Lenses



F35 Retail £4.00 each

CR39 Lenses



F36 Retail £4.00 each

CR39 Lenses



F37 Retail £4.00 each

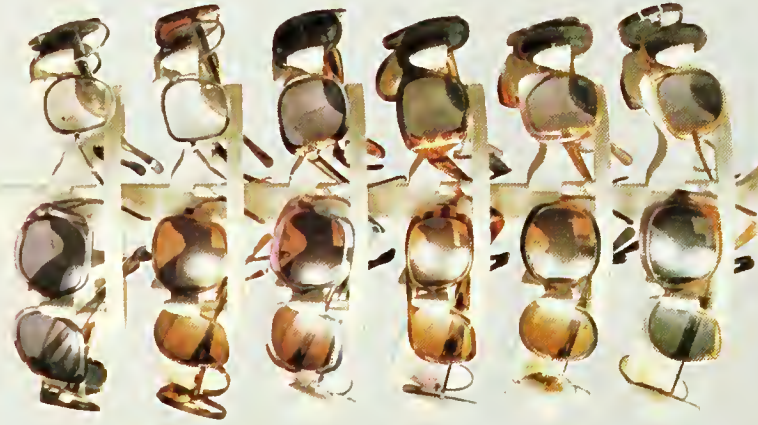
CR39 Lenses



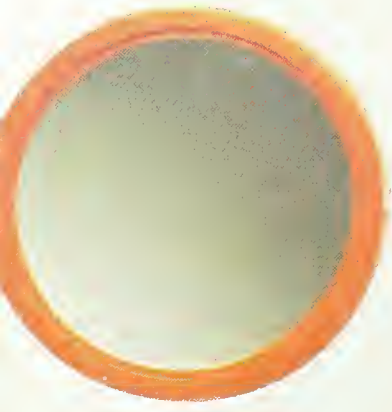
F38 Retail £4.00 each

CR39 Lenses

► Your Bartex Sunglasses will sell themselves with this beautiful new-styled display stand.



► This beautiful display stand supplied free of charge with an assortment of Bartex Fashion Sunglasses, value £150 to the retailer.



Bartex '77



**ONLY
£5.95
(inc VAT)**

PHOTOCHROMIC SUNGLASSES BY BARTEX

Make it easy on your eyes wear
Bartex Photochromic Sunglasses-
when the sun goes in they get lighter,
when it comes out they get darker.
And the process never wears out!
-Index corrected, impact resistant
lenses by Corning Glass of U.S.A.
-Top quality frames complete
with case.

OPERATION

Photochromic Sunglasses are
made of a special glass that darkens
as the sun gets brighter.

This is due to the reaction of
Ultra-Violet sunlight on the invisible
microcrystals of silver halide in the
glass, making them go dark; they
gradually become clear again when
out of the sunlight.

A from the House of Bartex

BARTEX

"Living" sunglasses, with lenses that
change automatically according to
the prevailing light conditions.



including sunglass case

This free counter display stand supplied with every order
for 12 assorted Bartex photochromic sunglasses.

Top quality, tempered, index corrected, ultraviolet
absorbing lens material, made by CORNING of U.S.A. is
used in Bartex 'photosun' sunglasses.

OPERATION

When exposed to sunlight, the 'photosun' glass darkens.
The more intense the light, the more intense will be the
colouration.

When removed from sunlight the colouration will
gradually disappear.

Prices do not include VAT







PL 180

Assorted coloured frames. 12 pieces per display box.

Retail £1.00 each.



PL 3018

Metal frames assorted nickel and gilt.

Retail £2.00 each.



PL 14

Metallised chromed frames.

Retail £2.00 each.

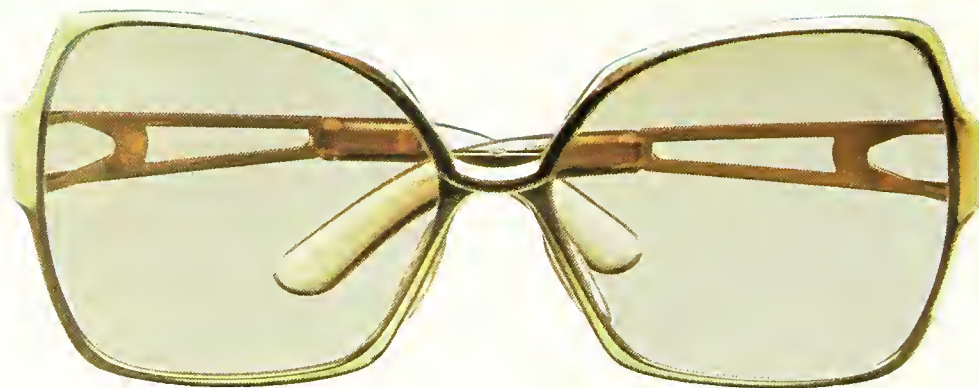


PL 215

Metal frames assorted nickel and gilt.

Retail £2.25 each.

Prices do not include VAT



PL 837
Metal frames assorted nickel and gilt.
Retail £2.25 each.



PL 1052
Metal frames assorted nickel and gilt.
Retail £2.75 each.



PL 1054
Metal frames assorted nickel and gilt.
Retail £2.75 each.



PL 10058
Metal frames assorted nickel and gilt.
Retail £2.75 each.



PL 10071

Metal frames assorted nickel and gilt.

Retail £2.75 each.



PL 244

Metal frames assorted nickel and gilt.

Retail £2.75 each.



PL 3021

Rimless assorted nickel and gilt.

Retail £3.00 each.



PL 3022

Rimless assorted nickel and gilt.

Retail £3.00 each.

Prices do not include VAT



PL 4084

Metal frames assorted nickel and gilt.
Retail £4.50 each.



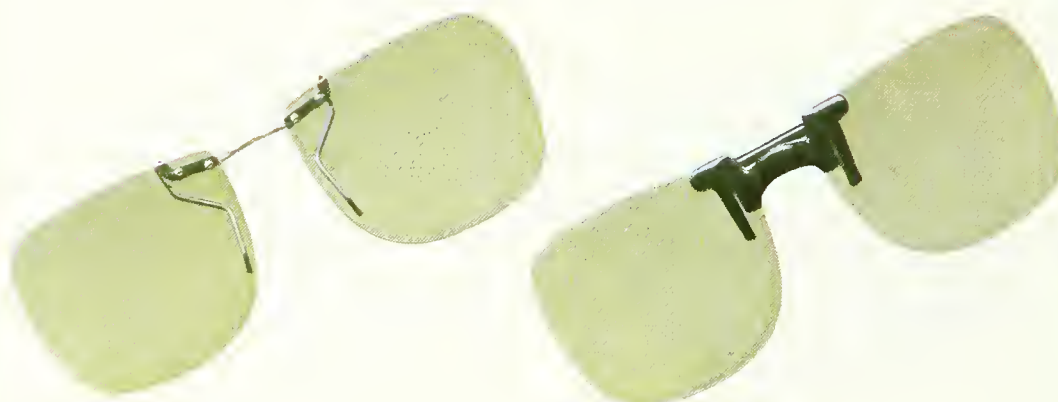
PL 35576

Metal frames assorted nickel and gilt.
Retail £4.50 each.



PL 35673

Metal frames assorted nickel and gilt.
Retail £4.50 each.



PL /CLIPOVERS

Bartex polarised 1-piece clipovers available in small, medium and large sizes. Complete in protective case.
Retail £1.25 each.

PL /FLIP-CLIPS

Bartex polarised available in medium and large sizes. Complete in protective case.
Retail £1.25 each.

Prices do not include VAT

Bartex are on the buses!



Watch out for Bartex bus sides in coastal resorts and city centres.

Remember Bartex point of sale material supports your sales of Bartex sunglasses.

Bartex are on the radio and in the press too!



Stands



This attractive counter display pack, with selected assortments of 2 dozen polarised sunglasses, as follows, is supplied free.

Pack 67 contains 4 each PL3002, PL3018, PL3011, 2 each PL1052, PL1054, PL3015, PL3016, PL3021, PL3022.

Price to retailer £34.00 (excluding VAT)



This stylish mirror top display stand is supplied **free of charge** with a full assortment of Bartex polarised sunglasses and clipovers to the value of £150 to the retailer.

The boxes that provide your customer with his **100% money back guarantee, without affecting your profits.**



Bartex polarised test filter.

Display Stands

Your Bartex Sunglasses will sell themselves with these eye-catching sales aids which are ideal for window or counter displays.



Alfred Franks & Bartlett Co. Ltd., Bartex House,
167-185 Preston Road, London W10 6TH. Telephone: 01-960 0922/8.

Chemist & Druggist

The newsweekly for pharmacy

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118th year of publication

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Contents

Comment □ Gracious beginning □ Steroid misuse	243
Government launches new prices policy	244
Pharmacy enters a new era at Lambeth	245
A truly Royal occasion	246
Evidence to working party on gp pharmacy in Scotland	248
The Xrayser column: Drugs bill	250
Storage and safety of medicines in the home	258
Law for retailers: Redundancy procedures	260
Irish degree transferred to Trinity College	263
£5,000 a year minimum for Irish manager pharmacists?	263
Owners and managers "should have equal responsibility"	265
Unichem sales up 47 per cent	266
Coming Events 267	People 250
Company News 266	Prescription Specialities 253
Market News 267	Trade News 253
New Products 252	Westminster Report 265
On TV Next Week 255	Classified advertisements 269

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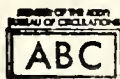
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Comment

Gracious beginning

No-one who was privileged to attend the official opening of the Pharmaceutical Society's Lambeth headquarters could fail to have been impressed by the gracious way Her Majesty Queen Elizabeth, the Queen Mother, performed the ceremony and took time to speak personally to as many people as possible—much beyond her original timetable. It is only unfortunate that the capacity of the hall restricted so severely the numbers attending.

Mr J. P. Bannerman, the Society's president, said the ceremony marked the opening of a new era in the Society's history and the Queen Mother herself said it symbolised the change of pharmacy from an art to a science. Brave words, which we must hope will enthuse members of Council, and the Society staff who have to turn policies into actions, into providing the leadership needed to meet the challenges of the "new era".

Steroid misuse

Some topical steroids, it appears, have fallen under a cloud through no fault of their own. One of the major manufacturers last week expressed concern about the mistaken belief that fluorinated steroids are less safe than non-fluorinated ones (see p248), a belief which, they say, has arisen because the former are more potent. If used correctly, however, even the strongest products present few problems. The dangers lie in misuse or abuse, when both fluorinated and non-fluorinated steroids can equally cause undesirable side effects.

These products illustrate again the need to educate the public in the use of medicines—a point emphasised by the paper on storage and safety of medicines in the home we publish this week (p258).

To some extent, the success of topical steroids in treating common skin conditions may have contributed to their misuse. Patients with chronic conditions are tempted to use the products prophylactically; they witness miraculous disappearance of a previously intractable skin condition and expect the same performance on all kinds of miscellaneous spots; and—the perpetual problem for health educators—they are reluctant to keep their "wonder drugs" to themselves.

Ultimately the responsibility lies with the prescriber but one problem is that many general practitioners have great difficulty in deciding whether a condition is likely to be steroid-responsive; some conditions which appear to respond, flare up again worse than before once treatment is stopped. Eventually the hospital skin specialist has to deal with the consequences of inappropriate long-term use, with considerable physical and mental discomfort for the patient.

While pharmacists will have every sympathy with these problems of diagnosis, the case for controlling indiscriminate issue of repeat prescriptions is reinforced yet again.

Government launches new prices policy

A consultative document outlining proposals for a new prices policy to succeed the present price control powers when they expire on July 31 was issued on Tuesday by Mr Roy Hattersley, Secretary of State for Prices and Consumer Protection. The main proposals are:

- ☐ Maintenance of a Price Code but without cost-based controls on the individual prices of manufacturing and service firms;
- ☐ The addition of new investigatory powers to the present functions of the Price Commission;
- ☐ The selection by the Price Commission of individual price increases, or of the margins of individual distributors, for investigation to determine whether they were reasonable in the light of broad statutory criteria;
- ☐ New powers for the Secretary of State to act on the Commission's recommendations, subject to Parliamentary procedure;
- ☐ Continuation of the present programme of references to the Price Commission by the Secretary of State of more general questions about prices and pricing practices, with new powers for the Secretary of State to act on the Commission's recommendations, again subject to Parliamentary procedure.

Margin controls 'augmented'

Mr Hattersley explained that margin controls—net profit margins for all enterprises and gross percentage margins for distributors—would continue in their present form, but would be augmented. The Price Commission would be empowered to investigate prices and its recommendations, if endorsed by him, be implemented by Statutory Order. The Commission would continue to receive advance notice of price increases from large manufacturing and service firms in addition to the quarterly profit reports which all large enterprises submit for margin control. Investigations into individual price increases would last a maximum of three months, during which time the price might be frozen. However, the Commission would have power to allow interim price increases.

The Commission would be guided both in their choice of inquiries and in the recommendations they made by criteria to be embodied in the new legislation. The criteria would not be a body of rules like the Price Code, but a statement of the economic considerations the Government believed should influence pricing decisions. The Commission would also have power to mount investigations into the margins of individual distributors. The investigations would last a maximum of three months, but there would be no price freeze. Orders applying to distributors would only restrict gross margins, not individual price increases.

The revised Price Code would ensure

that investigations and the implementation of the related recommendation would not mean unacceptable loss of profitability.

New legislation in the session of Parliament would be needed to enable the new policy to be put into operation from August 1 and a Bill will be introduced in the House of Commons before Easter.

A large number of interested organisations have been asked for their views. Comments on the proposals should be sent to the following address, to arrive not later than March 18: Department of Prices and Consumer Protection, Prices Policy Division, Room 532B, 1 Victoria Street, London SW1H 0ET.

The Retail Consortium has strongly opposed the proposals and is seeking an early interview with the Secretary of State.

Further picketing would be 'peaceful'

The picketing of North-west London pharmacies appears to have ceased for the time being.

According to Mr George Ward, managing director, Grunwick Laboratories Ltd, none of the pharmacies picketed during the past month were affected over the weekend. Grunwick's dispute with the Association of Professional, Executive, Clerical and Computer Staff—over union recognition at the film processing factory—had reached the stage where union pickets were said to be preventing patients entering pharmacies using Grunwick's services (last week, p200).

Mr Ward said he would have no hesitation in seeking an injunction to stop the picketing if it started again. The pickets—believed to be members of Brent East Labour Party or Brent Trades Council—had been warned that legal action would be taken. Mr Ward added that his factory windows were smashed at the weekend.

A spokesman for APEX told *C&D* he did not wish to discuss whether there would be any further picketing of pharmacies. "If we feel it necessary to picket then we will continue to do so, but it will be strictly peaceful and within the confines of the law", he added.

Brent East Labour Party has denied, in a reply to a letter from the Pharmaceutical Society, that physical efforts were made to dissuade patients from entering pharmacies and suggests that those pharmacists involved were taking sides with Grunwick Laboratories by continuing to use their services. The Society is to reply that it has no interest whatsoever in becoming involved in an industrial dispute—its only concern is to protect its members and to ensure that the public, particularly the elderly and very ill, get their prescriptions dispensed as quickly as

possible. The pharmacists being picketed were not taking sides, merely trying to fulfil their proper duties.

Endorsing insulin scripts

With the prices charged by the various insulin manufacturers now varying, the Pharmaceutical Services Negotiating Committee warns contractors that to ensure accurate payment it is essential that Forms FP10 are endorsed indicating the brand supplied before being submitted for pricing. Unendorsed forms will be returned by the Pricing Authority for confirmation.

A pharmacy service being lost? Tell the LPC

The Pharmaceutical Services Negotiating Committee is asking contractors to notify LPC secretaries whenever they learn of the possible closure of a pharmacy that would result in loss of pharmaceutical services in the surrounding area.

Applauding the successful efforts of Lincolnshire LPC in saving a pharmacy situated 10 miles from the next nearest (*C&D*, November 13, 1976, p669), the PSNC's latest newsletter adds: "It is important that contractors contemplating retirement, and who may have been unable so far to sell their businesses, should contact their LPC in order that contingency arrangements can be considered."

Gels containing 1 per cent of chlorhexidine gluconate have been added to the list of preparations prescribable by dentists.

Sterile fluids

The Department of Health has set up a working party on containers and closure systems for sterile fluids. The chairman is Mr J. G. Roberts, regional pharmaceutical officer, Mersey Regional Health Authority.

Its terms of reference are: "To examine currently available containers and closures for sterile fluids in the light of technical requirements and user needs and to advise on suitable products for supply to the National Health Service."

Evidence should be submitted to Mr R. N. Gooch, scientific and technical branch, supply division, Department of Health, 14 Russell Square, London WC1.

Hospital pharmacy plans

The Department of Health is to draft a circular, for consultation, on the pharmaceutical structure in hospitals—hopefully by the end of March.

Representatives of the Guild of Hospital Pharmacists section of ASTMS met Mr Eric Deakins, Parliamentary Under-Secretary to the Department, on Tuesday to discuss the proposed Noel Hall/NHS review. A Guild spokesman told *C&D* that once the management structure had been agreed salaries could be negotiated and "real results" were hoped for within four to six months.

☐ Mr P. M. W. Clarke has withdrawn his name from the list of candidates in the election for the National Pharmaceutical Association Board of Management. There will now be no ballot in area 10 and Mr S. G. Bubb will be returned unopposed.

Official opening of the Pharmaceutical Society's new headquarters

Pharmacy enters a new era at Lambeth

"The move from historical Bloomsbury to this exciting new building somehow symbolises the change in pharmacy which is now virtually complete—the change from an art to a science." Those words were spoken by Her Majesty Queen Elizabeth, the Queen Mother, when opening the Pharmaceutical Society of Great Britain's new headquarters at Lambeth on Tuesday.

Before unveiling a commemorative plaque in the assembly hall (it will later be permanently displayed in the entrance hall), the Queen Mother recalled that from its Charter of Incorporation in 1843 the Society had had as one of its first objects the establishment of a uniform system of education for pharmacists.

The Queen Mother continued: "Your education and practice has responded to the dramatic changes in treatment which followed the introduction of synthetic drugs, and I know that your members are involved in every aspect of the production and use of medicines. Your eminent scientists are helping to advance, still further, the boundaries of our knowledge and your members in hospital and general practice provide the expertise which is so essential to their colleagues in the other health professions. I have no doubt that in these new surroundings your Society will continue to meet the challenges of the future."

Links with Royal Family

In his address of welcome, the president, Mr J. P. Bannerman, referred to the Society's long and close links with the Royal Family, extending from the granting of its Charter by Queen Victoria to the Supplemental Charter granted by Queen Elizabeth II; the Society had also



The Queen Mother

enjoyed Royal Patronage since it was granted in 1937 by King George VI, and the first recipient of Honorary Fellowship created under the Supplemental Charter, had been Prince Philip, Duke of Edinburgh.

"Today marks the opening of a new era in our history," said Mr Bannerman. "This building will provide the headquarters from which the government and planning of our profession will be conducted in the future. As always our

thoughts will be to the continuing provision of a pharmaceutical service which is essential for the health needs of the nation."

A memento of the visit was presented to the Queen Mother by Mrs Estelle Leigh, vice-president. It was a Lambeth Delftware drug jar from the Society's historical collection. Made towards the end of the 17th century in the neighbourhood of the new building, it featured the head of an angel with outstretched wings—the face of the angel was reputed to be intended to resemble the features of King Charles II (who "may not have been too flattered by the resemblance"). The jar was labelled "C. Rutae"—conserve of rue.

During the ceremony, the Right Reverend Michael E. Marshall, Bishop of Woolwich, offered a prayer of dedication.

The distinguished audience included representatives of other professional bodies, both home and overseas, among them the presidents and secretaries of the Pharmaceutical Societies of Ireland and Northern Ireland.

More pictures on pp 246 and 247.

Tetbury's happy ending

The Tetbury dispute has had a happy outcome. The local doctors and pharmacists agree that the town now has a much improved pharmaceutical service and regular meetings are to be held between the two professions.

The two pharmacists are undertaking two extra half hour rota duties per week. Mr Michael Bran is operating a collection and delivery service for patients in nearby Avening and Mr Norman Bell is dispensing prescriptions during his half day closing. "Relations between the professions have never been better", says Mr Bell.

January register losses

A net loss of 14 pharmacies in January is recorded by the latest monthly corrections to the Pharmaceutical Society's register of premises. In England 29 premises were closed down and 16 new pharmacies were opened (three closed and three opened in London). In Wales one closed and one opened; in Scotland three closed and two opened for the first time.

Council member Mr J. P. Kerr was among the many with whom Her Majesty had an informal conversation

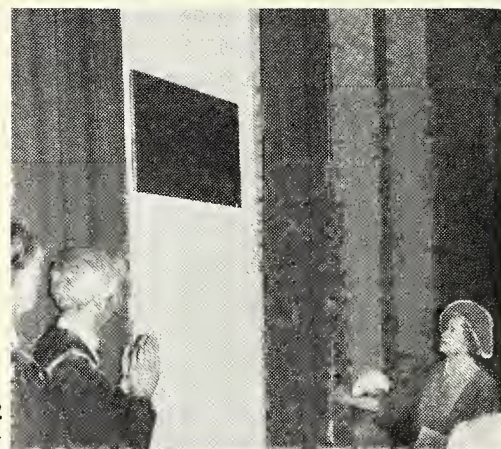
On behalf of the Society, Mr Bannerman received a signed portrait of the Queen Mother to mark the occasion



A truly Royal occasion

Her Majesty Queen Elizabeth, the Queen Mother, charmed everyone when touring the Pharmaceutical Society's new Lambeth headquarters after she performed the official opening ceremony on Tuesday (see previous page). A few of the highlights were recorded by *C&D*'s photographer. Following a welcome to Lambeth from the Mayor, Councillor W. A. Hall, the Queen Mother was greeted by the president, Mr J. P. Bannerman (1). Miss Julie Bannerman presented her with a bouquet (3) and after the unveiling ceremony (2) Mrs Estelle Leigh presented a Lambeth Delft drug jar (5). Mrs Leigh is also pictured (7) with the Bishop of Woolwich. Her Majesty took time to speak personally to many in the audience as she left the hall, among them Mr Roy Jones, chairman of the Society's Welsh Executive (4). From a balcony Her Majesty had a panor-

amic view (6) over Lambeth Palace towards the Houses of Parliament, and back inside was shown an original 1883 edition of Martindale's Extra Pharmacopoeia plus a "mock-up" of the forthcoming 27th edition by its editor, Mr Ainley Wade (8). She also admired the Society's drug jar collection (10). Before leaving (11) the Queen Mother signed the new visitors' book for the Lambeth headquarters (9).





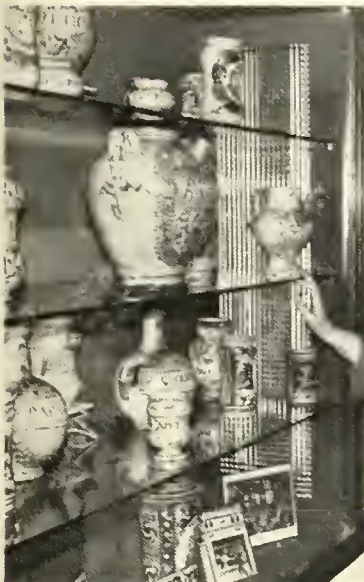
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11



PSGB Scottish Department evidence to pharmacy working party

Contract control to achieve planned distribution

Means of achieving planned distribution of pharmacies are outlined in the evidence from the Society's Scottish Department to the Working Party on General Practice Pharmacy in Scotland.

State ownership is rejected as an expensive solution. In addition, "the political implications of bringing under state ownership a major sector of retail trade would clearly go far beyond the confines of the NHS". A summary of the recommendations appears below:

1. Health Boards should have the right to withhold National Health Service contracts for new pharmacies in areas which are, in the opinion of a suitably constituted Scottish Pharmaceutical Practices Committee, already adequately served by pharmacies. There should be an appeals procedure similar to that at present for medical practices.

2. Where there is no pharmacy nearby, "open" areas should be designated in which National Health Service contracts will be available without restriction to applicants complying with the requirements of the Medicines Act.

3. All other possible financial encouragement should be offered by Health Boards to the sole pharmacy in an isolated community which dispenses only a small number of prescriptions, subject to agreement with Pharmaceutical General Council. Part-time pharmacies should be encouraged in areas where a full-time pharmacy is not economic. Arrangements whereby a pharmacist may be employed by the Health Board to supply medicines in areas without pharmacies and near health centres, are costly, deter establishment of new pharmacies in rural areas, and should be employed only in exceptional circumstances.

4. Local and other responsible authorities should be encouraged to offer premises at a preferential lease to essential pharmacies.

5. Approved prescription collection and delivery schemes should be completely supported financially by Health Boards. Legal objections and practical problems make it doubtful whether mobile pharmacies would be worthwhile.

6. There should be no further increases in numbers of pharmacists graduating.

7. Provision should be made for pre-registration experience for graduates of Scottish schools of pharmacy as far as possible within travelling distance of their homes.

8. The supply of medicines should be confined as far as possible to pharmacies.

9. If a Scottish Assembly is constituted, legislation concerning the sale and supply of medicines should not be devolved, but consultation with Scottish interests is essential.

10. A wider range of dressings and appliances should be available on NHS prescriptions.

11. If the Scottish Drug Testing Scheme is to be maintained, then the present system is satisfactory.

12. Campaigns for the collection and destruction of unwanted medicines should be financed by Health Boards and/or centrally from the Scottish Home and Health Department.

13. Communication and co-operation between pharmacists and other members of the health care professions should be improved.

Topical steroids: some are 'misunderstood'

Glaxo Laboratories Ltd are concerned about the mistaken belief in some medical circles that fluorinated topical steroids are less safe than non-fluorinated ones.

Speakers at a "teach-in" for the medical Press last week explained that this belief had arisen because fluorinated compounds were more potent, but non-fluorinated compounds could be just as dangerous if used indiscriminately. In general, the stronger the steroid, the more likely it was to produce unwanted effects if misused. However, systemic effects such as adrenal suppression were only theoretical hazards so long as patients used the products in the correct way. Skin atrophy too, was usually a result of steroid over-use. Doctors frequently had difficulty in diagnosing which diseases were steroid responsive; certain conditions, such as rosacea, appeared to be cured but became worse as soon as treatment stopped, leading to long term inappropriate use.

Fisons resolve dispute with NI wholesaler

Fisons Ltd say they have received suitable assurances from Harold Mitchell and Co through the Office of Fair Trading concerning the observance of Fisons' terms and conditions of sale relating to resale prices. Fisons are therefore resuming the supply of pharmaceutical products to Mitchells forthwith.

Consumerism conference

"Consumer affairs—threat or opportunity", is the title of a one-day conference for senior management of industry and retailing, being held in London next week (March 3). The conference objective is to examine consumerism and how industry's response to it can be "profitably built into an organisation's corporate marketing strategy."

Organisers are Forbes Publications Ltd,

14. General practice pharmacists should be more fully involved with the control of medication in geriatric homes and cottage hospitals.

15. More rationalised arrangements should be made for the supply of medicines outside normal business hours.

16. Pharmacists in general practice should be more directly concerned with patient care. As long-term possibilities, patients may register with pharmacies and pharmacists may accept responsibility for ensuring correct medication of the elderly chronic sick.

17. The supply by pharmacists of medicines at present on prescription only may be extended, in special circumstances.

18. Pharmacists should be encouraged, if necessary financially, to participate more actively in health education and to attend courses of instruction in the subject.

19. Refresher courses for pharmacists should continue to be organised on a regional basis under the general co-ordination of the Scottish Department and funded centrally from SHHD.

The recommendations were approved at the Scottish Executive's January meeting.

Hartree House, Queensway, London W2 4SH (telephone 01-229 9322) in conjunction with the Office of Fair Trading, Confederation of British Industry, Institute of Marketing, Retail Trading-Standards Association, and the United States Embassy. Conference fee is £50 plus VAT and final applications are required urgently.

Payment for VAT collection sought

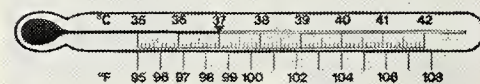
The National Federation of Self Employed is seeking payment for collecting VAT.

The federation believes unpaid VAT collection and the 8 per cent levy on National Insurance contributions amount to discrimination against the self employed. Members at a conference last weekend voted overwhelmingly in favour of taking the case to the Human Rights Commission at Strasbourg. The conference also mandated its executive to ask all the political parties to commit themselves to relieving the burden of the self employed.

The Retail Consortium has urged the Chancellor of the Exchequer to adopt a single charging rate of VAT in his Budget on March 29. The Consortium also wants to ensure that the retail sector receives the same investment incentives as manufacturing industry and has asked the Chancellor to make provision for capital allowances on retail premises, at least in respect of new investment.

Temperature in metric (°C)

Normal human body temperature in metric is 37 °C



The Metrication Board has produced a pocket-sized aid for comparing °C with °F on clinical thermometers. Available free to pharmacies from 22 Kingsway, London WC2B 6LE, or from the National Pharmaceutical Association

WHAT A WELCOME YOU'VE GIVEN THE WORLD'S NO.1 SUNTAN RANGE!



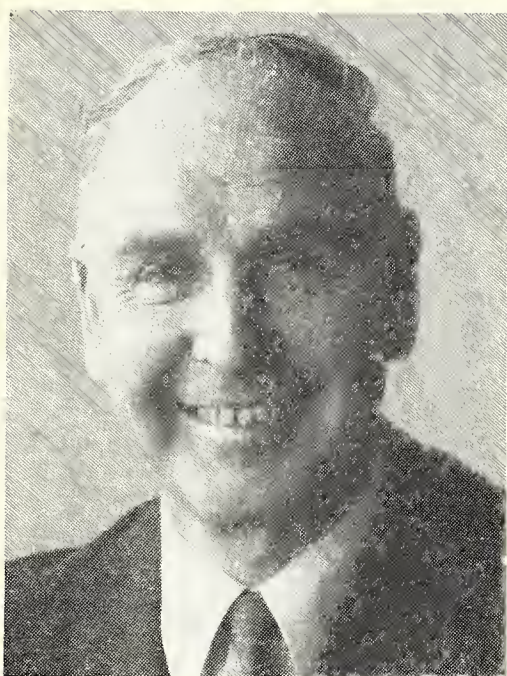
*TAN...
don't burn*

Coppertone

Your response to our Coppertone launch has exceeded our highest expectations, and we have already stepped up production. If we have not yet visited you we will get to you soon with details of our –

- * Generous introductory discounts.
- * Massive advertising campaign.
- * Free trade competition for a two week holiday in the Seychelles.

People



Mr Frank Goulding, FPS, chairman and managing director of Pfizer Ltd, is to be president of the Association of the British Pharmaceutical Industry and takes office on April 29. He succeeds Mr Michael Peretz, MBE, FPS, chairman of Cyanamid of Great Britain Ltd, on completion of his two-year term of office. Mr Goulding started his career as an apprentice in retail pharmacy in 1935 and qualified at Manchester University in 1940. After serving in the Army, he was in hospital pharmacy at Preston and Lancaster from 1946 to 1952. He joined Pfizer as a medical representative in 1952 and was in succession sales manager, sales director, and general manager before becoming chairman and managing director in May 1972. He has been a member of the ABPI's board of management since 1970 and a vice-president for the past three years. Coincidental with Mr Goulding's appointment, the ABPI board of management has elected three new vice-presidents: **Dr Brian Cromie, MB, BS, FRCP(Ed)**, chairman of Hoechst Pharmaceuticals; **Mr David Godfrey, BPharm, MPS**, a director of Wellcome Foundation Ltd; and **Dr Peter Main, MD**, a director of Boots Co Ltd.

Lord Wigoder of Cheetham, QC, has been appointed chairman of the Health Services Board in succession to Mr Ralph Gibson, QC, who has resigned on his appointment as a High Court judge. Lord Wigoder, who has been recorder of the Crown Court since 1972, will continue to practise at the bar.

Mr W. R. B. Sheldon, London division operations controller of Vestric Ltd, has retired after 38 years' service. He joined Evans, Sons Lescher and Webb as a representative in 1938 and after army service during the war, returned to Evans Medical, as it was then known. In 1960 he was appointed managing director of Gilbert Jackson Ltd, a company which Evans Medical had bought and stayed in Sheffield after Vestric's formation in 1966. He was appointed operations controller for the London division in 1971.

Topical reflections

BY XRAYSER

Drugs bill

The president of the Pharmaceutical Society (Mr J. P. Bannerman) has returned to the subject of the drugs bill and he has appealed to all branches of the Health Service to help to cut the cost (p200). Means should be sought to educate the public that medicines were not always necessary, he said. Much the same theme is to be found in the submission of further evidence to the Royal Commission on the NHS by the Socialist Medical Association, which says that health education should be explained to the general public, including the proper use of drugs, with a view to reducing over-consumption and drug dependency.

The discovery is not a new one. Sir Kingsley Wood, many years ago as Minister of Health, was wont to refer to what he called "the bottle habit", while Ian Macleod, some time later, spoke of "the bad national habit of medicine taking", to which he added on another occasion "medication on that massive scale". About twenty years ago, Mr Wm. Shepherd, MP, attacked "vast cataracts of mainly useless medicines", while Dr T. A. Morrison deplored the fact that we were becoming a nation of medicine swillers. There were other descriptive phrases, such as "the national thirst" and "a cascade of drugs".

But the need to take steps to cut costs goes further back than the examples quoted. As long ago as 1913 the county medical committee of Kent issued a "very important" circular to panel doctors on the matter. It very properly commenced by stating that the committee had no wish to dictate to any doctor how he should prescribe but merely, in case some points might have escaped attention, provide some information with a view to lessening the cost of prescriptions.

Advice

The advice offered began with the statement that a drug ordered by its proprietary name cost much more than when ordered by its BPC name. For those who may think that proprietary medicines were unknown in the world of medicine of that time, a list shows otherwise. Aspirin is four times the price of acid acetosalicyl, and money may be saved by using methyl sulphonal instead of Trional, hexamethylin tetramin in place of Urotropin, and acetomorph. hydrochlor instead of heroin.

But the catalogue does not end with equivalents. It goes on to point out that chloroform water costs less than spirit of chloroform; that aqua potabile is cheaper than distilled water and that savings may be effected by prescribing aqueous preparations instead of tinctures.

The advice contains the astonishing statement that nothing is to be gained by ordering less than a square foot of a spread plaster, for the chemist's charge just as much for a small area as they do for a square foot. There, for all to see, as long ago as 1913, is the genesis of over-prescribing—of prescribing more than the patient needs—and the advice comes with all the weight and authority of the Kent county medical committee. Having once opened the floodgates, it is difficult to control the cascade. One wonders what the patient was expected to do with the excess of plaster. Was he to put the whole square foot on—somewhere—regardless of the area requiring treatment, or was he to cut a piece of the size required and put the rest away in a cupboard to be recovered sixty years later in a large sack of unwanted medicines? For make no mistake, not only was there over-prescribing with official sanction but also the birth of hoarding.

I was disappointed to find that the plaster was not accompanied by the blister, the vomit, the bolus and clyster. It would be of interest to know what the global sum was in the country of *Humulus lupulus* which galvanised the attempt to control what must have appeared to be an alarming situation.

Ever since the manufacture of the first insulin preparation in 1923, we have been concerned with producing insulins of the highest quality. Today we supply a wide range of insulins with a service to accompany them—a service that includes booklets and cards for patients, and note pads and wall charts for you. If you have any queries, our representative is on hand to provide quick, on-the-spot help and advice. If you would like to know more about the Wellcome* Insulins Service, please fill in the coupon and post it to us.

**Specify Wellcome Insulins
for the product—and the service.**

**Wellcome**

Full information is available on request.
Wellcome Medical Division
The Wellcome Foundation Ltd.
Berkhamsted, Herts

*Trade Mark

I would like to receive further details of the Wellcome Insulins Service. Please arrange for your representative to visit me.

Name _____

Address of Retail Pharmacy _____

Best time for visit _____



Wellcome Insulins Service

New products

Cosmetics and toiletries

Ultralucent moisturisers

The Ultralucent range from Max Factor has been extended by the introduction of Body Moisturiser (£1.50) for all-over skin care. It is recommended for use all year round "whenever you're naked and want to pamper yourself". Available for sale from April 1 (Max Factor Ltd, 16 Old Bond Street, London W1X 3AH).

Maquisatin from Lancome

A companion product to Maquimat, Maquisatin make-up (40 g, £2.85) from Lancome is for women with normal to dry and sensitive skins and who are looking for a "satin" finish for their face. It is an oil in water emulsion and is said to give excellent coverage, concealing minor skin imperfections without giving a "mask-like" appearance. There are five shades of Maquisatin, ivory beige, sandy rose, golden honey, amber, spice (Lancome (England) Ltd, 14 Grosvenor Street, London W1X).

Living Proof by Geminisse

Living Proof is a collection of five treatment products in the Geminisse range from Max Factor. The collection comprises cream Hydracel (£21.00), a concentrated moisturising treatment for dry or very dry skin; Hydracel moisturiser (£12.75); Hydracel toner (£8.50); Hydracel cleanser (£8.50); and Hydracel masque (£8.50). The products are designed for use on all skin types and will be available in fifty department stores from April 1 (Max Factor Ltd, 16 Old Bond Street, London).

Suntan preparations

Skol rapid tan creme

Skol have added Rapid tan creme (£0.70) to their range of sun tan products. The company says that the creme, which is formulated to tan the skin with or without the sun, can be used to build up a natural looking tan before going on holiday or

whilst in the sun, as it contains a sunscreen as well. There are now five products in this range including Skol oil, sun tan lotion, sun tan creme, moisturising sun tan creme and Tansaver to preserve the tan.

The headcard for the 1977 Skol merchandiser features a "vibrant sunset surfing scene" and it is packed with the five preparations in the range, there is also a pre-pack merchandiser containing 24 units of rapid tan creme and a unit for 12 tubes of moisturising sun tan creme (Scott & Bowne Ltd, 50 Upper Brook Street, London W1Y 2AE).

Sundries

Doom from Napa

Napa products have introduced two slow release DDVP fly killers to their Doom pesticides products range—a regular fly strip (£1.05) and a fully controllable cassette (£1.39). The Doom garden pest spray has been amended to Doom insect killer and Doom insecticidal lacquer to Doom crawling insect killer. These amendments are in description only, formulations and packaging remain unchanged (distributors, Rexnell Ltd, 32 Powerscroft Road, Footscray, Sidcup, Kent DA14 5EG).

Filopur water purifiers

Filopur water purifier—designed to produce clear, odourless drinking water—has been introduced to the UK from the Continent. A filtration disc retains heavy metals and particles down to a size of at least 1/1,000mm. It does not remove fluoride or desalinate the water but removes free chlorine.

The household model (£21.40) consists of a small tap attachment, connecting hose (about 18in) and a disc which houses the filter and has a self-stick backing for fixing onto the wall or draining board. The travel model (£9.90) consists of a purification cartridge, a hose attachment, a syringe-type pump and self-sealing bag for storage. Replacement cartridges (£2.90) are available (Victorian Industrial Contracts Ltd, Filopur division, Holloway House, 443 Holloway Road, London N7).

Oral hygiene

Unwaxed dental floss

Westone Products are introducing En-dekay unwaxed nylon dental floss (40 metres, £0.45), which is soft and fine and is said to spread easily to remove plaque. It is packed in a lipstick-style container which fits into the pocket or handbag and is suitable for both right and left handed people. Each unit is blister-packed with 10 units to a display tray (distributors Vestric Ltd, Chapel Street, Runcorn, Ches).



New cameras and flash unit from Polaroid

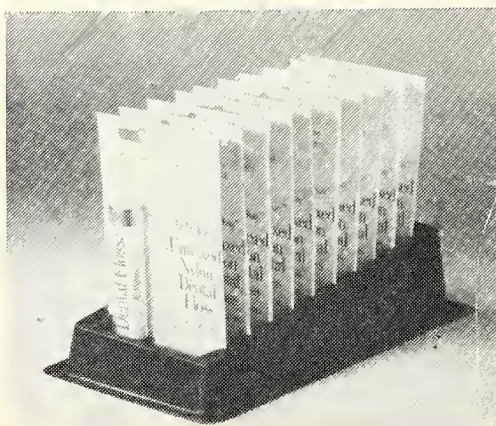
Polaroid have now introduced to the UK market a series of cameras and an electronic flash previewed at Photokina.

The SX-70 Alpha 1 Land camera (replacing the SX70) has extended versatility with new electronics, plus the external additions of tripod mount and neckstrap. Alpha 1 now allows the photographer to use a combination of flash and daylight—helpful, for example, when the subject is in shade and the background is bright. The new circuitry also prevents a picture being wasted if the user tries to make an exposure when the five forward-facing bulbs are spent. A new low-voltage detection system prevents partial camera cycles if the battery is weak. Addition of a tripod mount will allow full use to be made of the Alpha 1's automatic time exposures up to 14 seconds under low-light conditions. The four-element glass lens focuses from 10.4in to infinity.

The Polaroid SX-70 Alpha 1 Executive Land camera provides a less expensive model of the Alpha 1 with all the same electronic, optical, and mechanical innovations. The Executive has a plastic body covered in black pebbled synthetic material, Porvair, whereas the deluxe has a brushed chrome body, trimmed with leather.

The latest low-cost, non-folding rangefinder camera for SX-70 photography—the model 3000—features a coincident-image rangefinder and high-efficiency electronic shutter with automatic exposure control. Focusing is from 3ft to infinity. Features and style are similar to those of the model 2000. But the rangefinder of the new 3000 helps to ensure the best possible exposures when using flash; the 3000's automated scanning aperture shutter has a speed range of 1 to 1/125 second, and an aperture range of f/22 to f/9.4.

For both the 2000 and 3000 an electronic flash capability has been added by the introduction of the new Polatronic flash unit—the first designed by Polaroid specifically for SX-70 photography. Light distribution, colour temperature and regulated output are tailored to SX-70 film characteristics. Polatronic has an effective output of about 1200 beam candlepower seconds, the unit is capable of producing flash exposures over a range of 3 to 10ft. Energy source may be four 1.5 volt AA-size alkaline batteries (60-80 flashes with an initial recycling time of 7-10 seconds) or rechargeable nickel-cadmium batteries. The vertical-type reflector features a 50-degree angle of coverage, tailored to the cameras'





lens systems to provide uniform coverage of the SX-70 print area. The colour-corrective flash shield is matched to the spectral sensitivity of SX-70 film.

Coupled to the shutter with a rhodium-plated plug and cable assembly, Polatronic is said to reduce the "red-eye" problem common with flash-on-camera sources. The unit is attached with a quick-release bracket, and is fitted with tripod socket.

Polaroid's new folding EE100 Land camera has all the main features of Colour Swinger cameras plus many innovations. It accepts both rectangular and square format Polaroid pack film, is fitted with three-element, $f/9.2$, 114mm Polatriplet plastic lens which is colour-corrected and coated on all surfaces. The lens has a range of $3\frac{1}{2}$ ft to infinity.

The brilliant-image Albada viewfinder incorporates a bright-line outer frame for both film formats and is said to eliminate parallax problems.

The EE100 has electronic shutter and exposure control with shutter speeds continuously variable between 1 and 1/500 second, or higher. When required, a manual control allows a four-stop exposure adjustment. The camera uses standard flashcubes, Polaroid's new uniform-colour quality cubes or Hi-power flashcubes. A spring-loaded diffusing shield, automatically positioned in front of the flashcube socket when the camera is open, reduces the harshness of direct flash illumination. Cable release socket, tripod mount and neck strap are provided.

Polaroid (UK) Ltd, Ashley Road, St Albans, Herts, are no longer issuing suggested retail prices for their range.

Prescription specialities

RYTHMODAN injection

Manufacturer Roussel Laboratories Ltd, Roussel House, Wembley Park, Middlesex

Description Disopyramide (as phosphate) 50mg in 5ml (10mg base per ml)

Indications Cardiac arrhythmias

Contraindications As for other Rythmodan preparations

Dosage Initial bolus injection of 2mg/kg (but not more than 150mg total) slowly over five minutes, followed by oral therapy or infusion. See literature

Storage In a cool place

Dispensing diluent Compatible with sodium chloride, dextrose, compound sodium chloride and compound sodium lactate injections

Packs 5 ampoules (£3.30 trade)

Supply restrictions Interim prescription only order **Issued** February 1977

Trade News

Premarin cream colour change

The colouring agent, tartrazine, has been deleted from the Premarin vaginal cream. The preservative phenylmercuric acetate 0.1mg/g has been replaced by phenylethyl alcohol 10mg/g and the cream is now white in colour, say Ayerst Laboratories Ltd, Invincible Road, Farnborough, Hants.

Dyspepsia tablet difficulties

Dyspepsia tablets have been discontinued by Plough (UK) Ltd, Penarth Street, London SE15 1TR. The inclusion of chloroform in the formulation presented production problems and there were many times in 1976 when Plough were without stock. The company says that the chloroform made product stability difficult.

Mum rolls on

Bristol Myers Co Ltd, Stamford House, Station Road, Langley, Slough SL3 6EP, are spending £500,000 on advertising Mum roll-on throughout 1977. The company says that this is the largest ever expenditure, a 25 per cent increase on last year. Point of sale material is available in the form of dump bins, display units, back-cards and shelf strips.

Progress nail brushes

A nail brush pack holding 24 brushes in four different styles, two traditional and two modern, has been added to the Trissa range of Swiss manufactured hair brushes from Progress Shaving Brush (Vulfix) Ltd, 12 Kingsfield, Windsor, Berks. A counter display is available from all major wholesalers.

Beecham at bathtime

Hiltone Softly Blonde packs from Beecham Proprietaries, Beecham House, Great West Road, Brentford, Middlesex are currently featuring a 5p off coupon, redeemable against any of the five Shaders

range products, and following the success of recent added-value and money-off promotions, Fynnon bath salts are now being offered in 20 per cent added value packs. The trade prices in the Price Service shown for products from Beecham Foods, are now the standard trade prices. Special rates are available for direct orders of 15 cases minimum.

Satin Flow coupon

Max Factor Ltd, 16 Old Bond Street, London W1X 3AH, have introduced their first "money back" coupon offer. Purchasers of Satin Flow cleanser (£0.89) will be able to apply for a 20p refund by sending off the red and blue collar attached to the bottles. Offer ends June 30.

Matey promoted

A television advertising campaign for Matey begins on March 7. Nicholas Laboratories Ltd, PO box 17, 225 Bath Road, Slough SL1 4AU, believe that a strong promotional campaign at this time of year is especially valuable to the retailer and are backing the television advertisements with a badge promotion arranged in association with the World Wildlife Fund. Each special pack of Matey will carry one of a set of six badges, depicting a whale in danger of extinction. For every pack sold approximately one halfpenny will be donated to the Fund.

Medibath advertised

The recently launched Medibath from Fassett & Johnson Ltd, Dawson Road, Bletchley, Milton Keynes MK1 1JT, is being supported in the national Press until about the end of March. The product (£0.59) is considered to have a unisex appeal within all age categories; while possessing the luxury properties associated with bath additives it also contains a mild antiseptic to help "purify" the water.

Coty's red lips

Four new colours in the range of Original lipsticks from Coty Ltd, Great West Road, Brentford, Middlesex, add a vivid splash of red to the brightly hued clothes in fashion this spring. The lipsticks (£1.00) come in express red, cardinal red, coral fire and rampant red, and will be available for sale in March.

Continued on p254

Mrs Agnes Smylie receiving a cheque for £50 from Mr F. Hanson, Ireland manager of Parke Davis & Co Ltd. Mrs Smylie came second in the national Benylets competition; pictured with her is her husband Mr John Smylie who was a runner-up. They are both members of the staff of Mr R. V. Campbell, Co Down



Trade News

Continued from p253

Oral—B 35

The Oral—B 35 toothbrush has been added to the Oral—B range from Knox Laboratories Ltd, The Firs, Whitechurch, Aylesbury, Bucks. The company says that the toothbrush has been developed in response to requests from dentists all over the world. Intended primarily for use by adults the Oral—B 35 combines the manoeuvrability of the Oral—B30 with the four rows of filaments that are the feature of the Oral—B 40. The resulting brush is small enough to search out dental plaque and food debris, yet it has more filaments than many larger brushes. Oral—B 35 (£0.46) will be promoted to dentists throughout the UK both by the sales force and professional journal advertising.

Stimula sampling continues

An advertisement offering a free sample of Horizon Stimula was to appear in the *Daily Express* this Friday. Readers applying for the sample will also be sent a "5p off next purchase" coupon. Akwell division, G. D. Searle & Co Ltd, Lane End Road, High Wycombe, Bucks HP12 4HL, say they have had 11,000 requests for free samples since the programme started.

Radiol changes

Radiol Chemicals Ltd, Stepfield, Witham, Essex CM8 3AG, have redesigned the slip pack for Neurodyne 10s. The company says that the recent promotion to doctors through mailing and advertising in medical journals has resulted in a "considerable increase in sales". Radiol fly repellent is currently being promoted to chemists and direct buying terms of 12 charged as 10 are available from the company, which is

also offering an extra discount of 12½ per cent on a £50 order or 10 per cent on a £25 order with any other items from the Radiol/Radian/Wade and Biovital ranges. A new display outer is available.

Philishave television boost

A seven week television advertising campaign for Philishave from Philips Electrical Ltd, Century House, Shaftesbury Avenue, London WC2H 8AS, begins on February 28. The advertisements continue the product's theme of "our closest shave yet".

Bangles from Panty Pads

Lilia-White Ltd, Alum Rock Road, Birmingham B8 3DZ, are offering free Jobo bangles on Panty Pads regular and super 10s until April 1. The offer will be flashed on to the packs and the consumer will have to send two pack fronts to receive two bangles in the colour of their choice—red, green, white, brown, ivory and blue.

Free Tabac shampoo

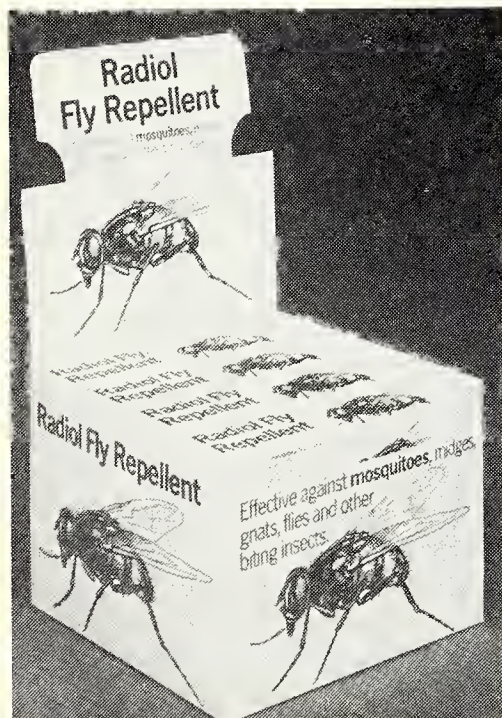
Tabac after shave is now available in a 75ml size (£1.69) and is being offered with a free miniature shampoo by Eylure Ltd, Grange Industrial Estate, Llanfrechfa Way, Cwmbran, Gwent.

Slymbred at Shire Hall

Blakeys Food Co Ltd, Chancel House, East Street, Bingham, Nottingham, have appointed new distributors for Heudebert's Slymbred. They are Shire Hall, White House Chambers, Spalding, Lincs PE11 2AL. Slymbred is available in two varieties, white and wholemeal.

Epanutin 25mg capsules

Parke, Davis & Co, Usk Road, Pontypool, Gwent NP4 8YH, are to introduce Epanutin capsules 25mg on March 1. The capsules have a white opaque body and a purple cap and are packed in Securitainers of 500 (£3.30 trade).



Apocaire offers

Apocaire offers from Sangers Ltd, Cinema House, 225 Oxford Street, London W1R 1AE, for March include: Alberto VO5 conditioner, Maeleans toothpaste, Andrex, Nice 'n Easy, Palmolive rapid shave, Imperial Leather soap, Harmony hair-spray, Heinz baby foods, Listerine, Us antiperspirant, Kotex Sylphs, Kleenex for Men, Lillies, Tufty Tails, Radox, Head & Shoulders, Nikini panty towels, Batiste, Elastoplast and Twice as Lasting.

Unichem's March discounts

From March 9-29 Unichem Ltd, Crown House, Morden, Surrey, are offering their members ten lines at discount prices: Mum Rollette and refill, Farley's rusks—large and family sizes, Curity Snugglers, Alberto Balsam shampoo and conditioner, Kotex 10's—sizes 1 and 2, Philips flashbulbs, Elnett hairspray and SR toothpaste.

Promotions were up by nearly a quarter last year

Promotions across the range of products carried by the average supermarket in Britain (which for this definition includes Boots) last year ran 23.8 per cent above 1975, according to provisional figures from M. S. Surveys & Promotional Services Ltd. Item by item, statistics will be incorporated in their *Promotion 76* annual report to be published next month.

The provisional results have emerged at the same time as indications from Boots in the direction of sharper and more co-operatively based promotions being planned with the major cosmetics houses. However, the M. S. Surveys category "Cosmetics" was one of only seven (out of 22) which failed to improve on the promotional rate of 1975, another being "all medical products", Cosmetics were

down by 6.7 per cent and medicinal products by 16.3 per cent.

Over all, December's promotional performance was 3.7 per cent down over that for the same month in 1975. The five "chemist group" categories measured monthly by *Merchandising and Promotional Intelligence* ended the year with percentage differentials against 1975 as follows:

Baby foods	+31.1
Toiletries	+12.4
Cosmetics	-6.7
Hair preparations and shampoos	+4.25
All medicinal products	-16.3

There is reason to suppose that cosmetics will recover promotional impetus this year, partly because the Queen's Jubilee supplies an excellent theme and partly because it is a product category which appears to be due to a big incentive marketing form of revival.

As predicted last month (*C&D*, January 29) new promotions for all the products measured were coming forward last year at a more brisk rate than in 1975, this year closing with an increase of 57.6 per cent. However, the new products were down by 34.3 per cent, the numerical score for the "chemist group" being:

	1975	1976
Baby foods	12	12
Toiletries	93	54
Cosmetics	226	133
Hair preparations	58	39
All medicinal products	23	14

From the standpoint of promotional types, 1976 was manifestly the "year of the coupon"—up by 54.5 per cent. Reduced price offers ended 1976 up by 28.9 per cent and self-liquidators by 30 per cent. Give-aways scored an advance of 22.4 per cent and free mail-ins went ahead by 23.1. Against all predictions it was a bad year for competitions which were down by 7.5 per cent. New packs dropped by 31.5 per cent and multi-packs by 23.4.

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Station Road, Hampton, Middlesex.**

on TV next week

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Abdine: Sc
Anadin: All areas
Aspro Clear: All areas
Benlyets: Sc, NE
Bic razor: All except U, G, E, CI
Build Up: All except U, E
Crest: M, So
Elseve balsam: All areas
Grecian 2000: All areas
Johnson's baby powder: All except E
Macleans: All except E, CI
Milgard: M, U
Milton crystals: M
Parkers: WW, We, A, CI
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Storage and safety of medicines in the home

by Mrs Ann Allen, BPharm, MPS*

This study investigates the attitudes of the general public towards medicines through visits to patients' homes and by questionnaire. It illustrates where difficulties lie in the safe use, storage and disposal of medicines and suggests where pharmacists can help.

Arrangements were made with the district nursing officer to accompany three district nurses on their rounds. Information was collected on the number, types and quantities of drugs kept, source, storage and details of containers and the opinions of the patients gleaned during conversation.

The 29 patients visited were almost all elderly. Five were diabetic; two were asthmatic and one a chronic bronchitic; one patient had Parkinson's disease; one had tuberculosis, and the remainder were on a digoxin/diuretic regime, or were taking medication for rheumatism.

A questionnaire was made out to gather similar information and relevant biographical details. 250 questionnaires were distributed among nursing students and staff and a few to the general public. 61 were returned but only 49 were completed fully.

Analysis

Because of the wide disparity in age and degree of incapacity between the people surveyed by questionnaire and visits they have been separated in some sections of this discussion. It was then possible to enlarge on the details observed on visits whilst dealing more generally with the replies to the questionnaire.

The bathroom cabinet was the most common site followed by the kitchen cabinet, for medicines stored by the general public. Only 5 per cent—all with children—locked medicines up. Most of the others with children (eight replies) kept medicines in the kitchen, reflecting the greater amount of supervision possible. The mother of small children spends a large proportion of her time there and is unlikely to leave children alone there, being aware of the many other dangers. Most medicines were enclosed, rather than on open shelves or window sills. It is not always practical to keep medicines locked up, and the tone of most replies was sensible, which is extremely reassuring.

The adverse effect of warm, moist atmospheres in bathroom and kitchen on the stability of medicines must bow to the advantages of greater safety. Convenience played an important part in most sites chosen. Many people kept medicines in the places where they had most frequent use; an inconvenient storage site will not

be used consistently. Thus the pharmacist should assist in educating the public in the dangers of medicines and let individuals find their own way of handling the problem. As 28 per cent of replies indicated no fixed location for medicine storage such education is important.

It is generally accepted that medicines must be kept away from children but the most effective means is uncertain. For a *child-proof* container to be effective it must not be so difficult for an adult to use that it will be left open, yet it must either be impossible for children to open or take them so long that they will tire before gaining access to the contents. Gartside and Carter¹ suggested that the push-and-turn (Clic-loc) became a toy and that children who could read the instruction on the lid could open it and teach the trick to younger children. The attractive contents could even become regarded as the

reward for opening the container. This is potentially more dangerous than an innocuous container which the child can easily open but finds uninteresting.

Child-resistant containers may beneficially affect the public's attitude towards medicines. Over-the-counter items are not generally treated with as much respect as prescription-only products. On asking to see medicines I was often told "we haven't any—only aspirin". Perhaps the enclosure of analgesics in child-resistant containers will press home the potential danger.

Elderly people often have difficulty in opening child-resistant containers. Those living alone do not require them and they may leave tops off altogether or change the container, with consequent problems of stability or identification. On one visit a woman said that she preferred to have her elderly mother's barbiturates in such a container because it prevented her from

Figure 1. Where medicines are stored (percentage of replies)

	Locked cupboard	Unlocked cupboard	Shelf	Drawer
Bedroom	2½ (2½*)	12	5 (2½*)	2½
Bathroom	2½ (2½*)	39 (2½*)	5	—
Kitchen	—	22 (4½*)	5 (all*)	—
Others	—	2½	2½	—

* Percentage with children

Figure 2. Examples of medicines transferred from original container

New container	Contents	Labelling
<i>For ease of carriage:</i>		
Smaller tablet bottle	Capsules	No answer
Smaller tablet bottle	Plain tablets	Hayfever tablets PIRITON
Small plastic bottle	Plain tablets (indigestion)	None
Small handbag phial	Plain tablets (Aldomet qds dose)	None
<i>For ease of storage:</i>		
Smaller bottle	Mixture	None
Smaller bottles	Ampicillin capsules, Karvol capsules, Valium, Mogadon and aspirin tablets	None
<i>Container used for another purpose:</i>		
A clean bottle, labelled clearly	Plain tablets	Paracetamol 500mg i-ii 4 hrly prn
Plastic container with air-tight lid	Capsules	Halibut oil capsules
<i>Convenience:— 1 upstairs and 1 downstairs:</i>		
Cardboard drum	Soluble aspirin	Saccharin tablets
<i>One large container for all tablets:</i>		
Large plastic tablet bottle	Plain and sugar-coated tablets, and capsules	Melleril 100mg

Figure 4. Total containers possessed

No of containers held	0	1	2	3	4	5	6	7	8	9	10	11	12	17	18	23	32
Households with that number	3	9	8	8	8	8	4	7	4	4	2	5	3	2	1	1	1

No of containers held	0	1	2	3	4	5	6	7	8	9	10	11	12
Visited households with that number	2	3	1	3	4	4	3	3	3	1	1	0	1

* Formerly a preregistration student with Suffolk Area Health Authority, Mrs Allen is now a pharmacist at Staffordshire General Infirmary.

taking more than she was given. Whether child-resistant containers are used should, I feel, be up to the discretion of the dispensing pharmacist. Of the elderly people visited, only four had Clic-loc and only one of these admitted experiencing difficulty. They seemed to have more trouble with blister packs and foil wrappers. This supports J. R. Davidson² who pointed out that palm-sized, screw-capped bottles suit elderly patients best. Clear glass is preferable as many identify the contents by appearance rather than by reading the label on the container.

Most of the people visited had developed their own methods of storage usually geared to helping them to take the preparations correctly. One lady had laid all her medicines out on a tray and written herself a note of which to take and when. A blind lady kept her Moduretic on a sideboard and her digoxin on a window-sill. Although one of the bottles containing Moduretic was labelled digoxin, she knew the diamond shape by touch. The bedridden patients usually kept medicines on a bedside table or a nearby window-sill. One elderly couple kept their's all together on the mantelpiece, which is a threat to their safety and drug stability. Only two kept them scattered around.

Extra containers

All the patients visited kept their medicines in the original containers dispensed. However 16.4 per cent of questionnaire respondents had transferred medicines into new containers for the reasons shown in figure 2. Only one patient transferring drugs for ease of carriage had labelled the new container. Thus it might be worth considering the supply of a small, empty, labelled bottle for mobile patients. Discretion would need to be exercised and the purpose of the extra container carefully explained. Although the wrong tablets could be placed in the container, while the practice of transfer exists we should recognise it, appreciate the reasons for it and seek a way of presenting medicines to minimise the danger.

Two people transferred medicines into smaller containers to save storage space. One person transferred five separate items and labelled none of them. Another filled one large container with different sorts of tablets and capsules. These examples illustrate two reasons why pharmacists should keep container size to the minimum—except where an elderly patient finds small bottles difficult to handle—and doctors should keep the volume prescribed small wherever possible.

The labelling of containers should always be clear in appearance and meaning, to be read and understood. Several of the people visited had badly labelled medicines. Some, supplied by a dispensing doctor, even missed off tablet strength and division of dosage. In some cases, however, the standard labelling could be more lucid eg Distalgesic—"One or two when necessary". To take it correctly the patient must know its purpose so writing "for pain" on the label would save a great deal of confusion. Elderly people in particular find it easier to take their usually complicated drug regimes properly if they understand the purpose of each item. Many empty bottles come back to the pharmacy on which the patient has written "heart

tablets", "water tablets", etc. The doctor who is aware of each patient's idiosyncrasies could request such labelling on the prescription, otherwise the pharmacist can only include it at the patient's specific request.

Doctors could minimise confusion and unnecessary expense if they saw the patients' medicines regularly. One elderly lady visited was very confused, having received a new stock of medicines before her old stock had run out. She had two bottles without realising they both contained Feospan and two of the tablets had been changed: Lasix had been replaced by Moduretic and codeine phosphate by Lomotil. She did not know whether or not to stop taking the old tablets, or what Moduretic and Lomotil were for. The Lomotil was an example of inadequate labelling leading to non-use. It read "to be taken when necessary" but as the patient was unaware of its purpose she had continued to have attacks of diarrhoea without taking any medication.

Wastage

An example of how monitoring of drug usage by doctors could reduce wastage arose at West Suffolk Hospital where £184.74 of drugs had been recovered from a single patient's home. Most containers were still full and apparently the patient had been collecting his prescriptions for years without using them (figure 3).

Figure 4 shows that most patients have between one and five containers, although a few have up to 32. The peak for the elderly and chronic sick visited is slightly higher, at 4-5 containers, and falls off at 8. Those with the most containers appear to be hoarders. The person with 32 containers rarely or never used 79 per cent, the one with 23 items 52 per cent and those with 17 items an average of 66 per cent. The proportion of containers currently in

Figure 3. Drugs returned from one patient

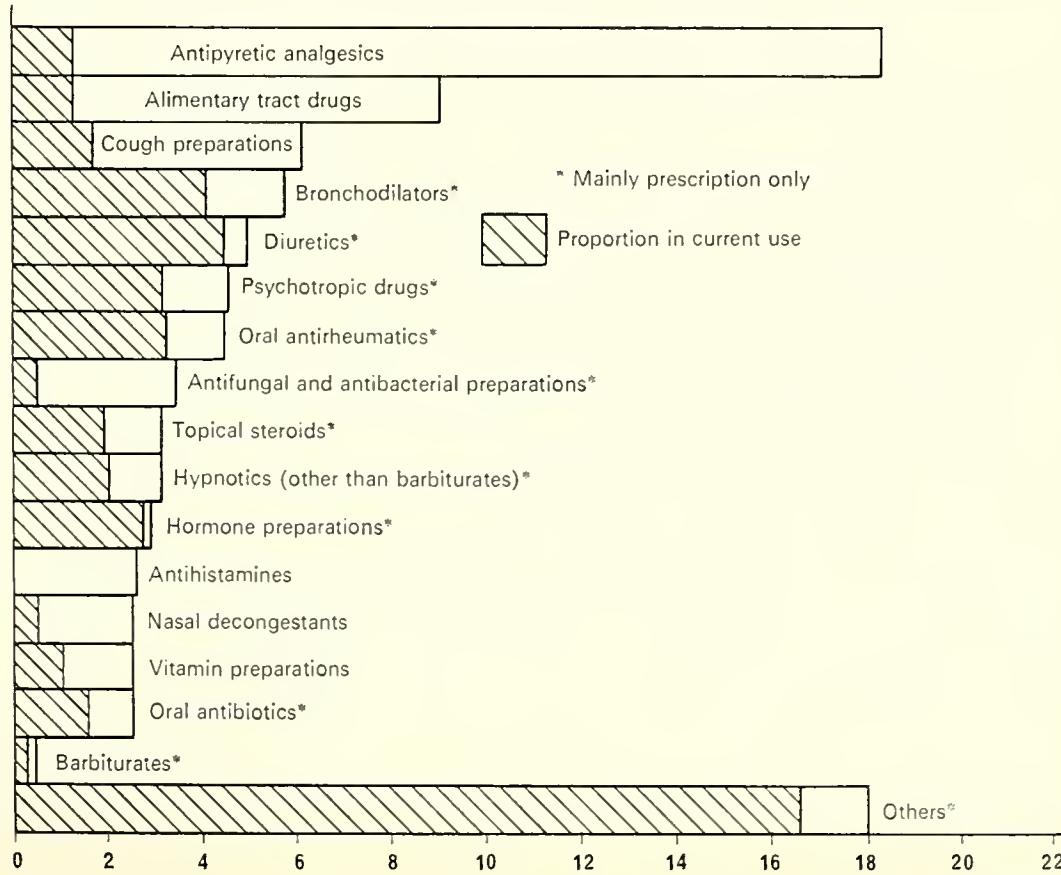
Aldactone A tablets 25mg, 270 in 3 bottles	£10.00
Anusol suppositories, 4 in 1 box	0.12
Detclo tablets, 206 in 4 bottles	7.40
Digoxin tablets 0.25mg, 2,461 in 42 bottles	5.50
Distalgesic tablets, 73 in 1 bottle	0.45
Dytac capsules 50mg, 182 in 4 bottles	6.20
Lasix tablets 40mg, 1,827 in 32 bottles	60.58
Lomotil tablets, 18 in 1 bottle	0.34
Nembutal capsules 100mg, 489 in 7 bottles	3.10
Penbritin capsules 500mg, 147 in 4 bottles	10.20
Probanthine tablets 15mg, 2,706 in 32 bottles	27.35
Seprtrin tablets, 56 in 1 bottle	2.40
Serenesil capsules 500mg, 28 in 1 bottle	0.40
Slow K tablets 600mg, 1,275 in 21 bottles	5.20
Tedral SA tablets, 707 in 12 bottles	4.00
Tuinal capsules 200mg, 60 in 1 bottle	0.50
Vibramycin capsules 100mg, 128 in 5 boxes	41.00
Total value at trade prices, December 1975	£184.74
Also: 300ml red mixture (unidentified) and 2 empty 50ml Dorbanex Forte bottles	

use for various classes of drug is shown in figure 5.

The most common group of medicines was aspirin-like analgesics, 76.3 per cent of which were bought over the counter. The second was drugs acting on the alimentary tract, 49.4 per cent of which were pur-

Continued on p260

Figure 5. Number of containers by pharmacological class of contents



Law for retailers

Redundancy procedures

by Nemean

The Employment Protection Act 1975 affects the law of redundancy in two ways. Firstly, it lays down a new procedure for handling redundancies. This makes consultation with trade union representatives obligatory before dismissing employees who are members of that union. Also if mass redundancies are contemplated, one must give the Secretary of State for Employment the requisite warning. The Act also brings about many amendments to the Redundancy Payments Act 1965.

As the facts and figures of redundancy will be of more practical importance to pharmacists, I shall now outline the redundancy payments system. The Act as it will be referred to from now is the Redundancy Payments Act of 1965 as amended by a similar Act of 1969, and the Employment Protection Act of 1975.

The Act requires an employer to make a lump sum compensatory payment, called a "redundancy payment" to an employee under age 65 (men) or 60 (women) who is dismissed because of redundancy, after at least two years' reckonable service since the age of 18. Redundancy as defined in the Act arises if:

☐ Employer has stopped, or intends to stop, carrying on his business.
☐ Employer has stopped, or intends to stop, carrying on his business in the place at which the employees are contracted to work.

☐ Requirements of the business for employees to carry out work of a particular kind, have stopped or diminished, or are expected to stop or diminish, at the place at which they were contracted to work.

☐ Dismissal, sufficient to render an employee redundant, may take place when the employee's contract is terminated by the employer—for reasons as aforementioned, there need be no formal dismissal.

A redundancy payment is calculated on the following scale, reckonable service being limited to a maximum of 20 years and any weekly pay in excess of £80 being disregarded. For each year of reckonable service:

From age 41 to 65 (man) or 41 to 60 (woman), 1½ week's pay.

From age 22 to 40, 1 week's pay.

From age 18 to 21, ½ week's pay.

A redundancy payment may also be claimed in certain circumstances by an employee who has been laid off or kept on short time for a specified period.

Redundancy fund

The Act established a redundancy fund paid in respect of employed earners. Any employer who has to make a redundancy payment, as required by the Act, may claim a 50 per cent rebate on the fund. Any entitled employee unable to get his redundancy payment from his employer may apply to the fund. The Act provides also for the disputes about entitlement to redundancy payments, or about claims to rebate, to be referred to the industrial tribunals.

Exceptions

The Act covers all employees in all kinds of employment. As long as the employee has 104 weeks' continuous employment with the employer then he will be entitled to a redundancy payment. There are, however, exceptions, and the following are examples of groups of people not eligible for redundancy:

☐ An employee whose continuous employment ends after his 65th birthday (man) or 60th birthday (woman).

☐ Employee employed by spouse.

☐ Self employed persons, such as locum pharmacists.

☐ Crown servants or employees in the National Health Service.

Safety of medicines in the home

Continued from p259

chased. Barbiturates were encountered six times less frequently than other hypnotics, which consisted mainly of Mogadon.

Generally, over-the-counter medicines are for common recurring ailments and are used occasionally, as necessary: only a small proportion of these were currently in use. The low usage of antihistamines reflects this, particularly as the results were collected in winter. Drugs prescribed for particular states of ill health show a higher proportion in current use.

The large group of "others" consisted mainly of varied, less common prescription items for particular conditions and hence the proportion in current use (90 per cent) is high. Patients taking prescribed medication appear to adhere reasonably well to it. On the lower side are the hypnotics, which is desirable—66 per cent were in current use, and topical steroids—61 per cent were currently in use.

Topical preparations have a tendency to accumulate; the 85.3 per cent of anti-fungal/antibacterial preparations not currently in use were mainly topical. Unlike oral preparations, the containers given do not represent an exact number of doses and are notorious for their ability to become dirty. Eye preparations are a particular risk because dirty ointment or drops could cause irritation or infection.

Some patients retain old tablets which then have a tendency to scatter and reappear in the wrong container. This was encountered several times during visits. Where the odd tablet is noticeably different

from the rest, the patient becomes aware of it, but many are not detectable.

Hoarded medicines cause problems when they are reused or taken accidentally. They may have deteriorated and be, at best, useless or their use may now be inappropriate because the patient is mistaken in their action. Aggravation of the ailment, or masking of symptoms, could occur. Antibiotics present a particular problem because patients stop taking them when symptoms disappear. Someone recently told me he never took a full course of penicillin but saved them for when he had a cold because they always cured his colds! This sort of misuse is borne of ignorance of drug action. Where the drugs a patient is taking are known to interact he is usually warned of over-the-counter preparations and foods which do so, but problems may arise with prescription items kept from a previous occasion.

When asked by questionnaire how they disposed of medicines, 66 per cent of those answering claimed to dispose of them one way or another, 8.5 per cent were thrown away with rubbish, 7.5 per cent burnt and 50 per cent washed down the sink or toilet. Only 6 per cent return them to their doctor or chemist. The elderly people visited were more inclined to do this, in the interest of saving them. 27.5 per cent admitted to keeping them after they were needed in case they were needed again but two-thirds of this group claimed they would dispose of them eventually.

Perhaps the demise of the open fire explains why only 7.5 per cent would burn them, the most preferable method. By far the most popular method is to wash them down the sink or toilet. Disposal with the rubbish is the most dangerous method

as the medicines may be blown about by the wind.

Conclusion

First, I must stress the bias of these results. The questionnaires were answered mainly by nurses or student nurses, some doctors and only a minority of patients. The visits were to homes which were regularly visited by a district nurse. Therefore these results may be slightly over-optimistic. However the variation in replies is, I think, representative of those generally found and a number of valid points have been drawn from them.

Generally, members of the public show common sense in their handling, storage and disposal of medicines. Many difficulties could be minimised by clearer labelling and better communication and cooperation between doctor, pharmacist and patient. The continuing education of the public has an important part to play, since understanding of the reasons for measures taken, or recommended, means better cooperation.

Acknowledgments

I would like to thank all who assisted with the project, including: Miss R. H. Moore, nursing officer, midwifery and home nursing, and her nurses; Mr M. Tute, director of nurse education; Miss P. Cooper, principal nursing officer; Mr R. Purkiss, principal pharmacist for research and development; Dr S. Ellis, area pharmaceutical officer, Suffolk Area Health Authority; West Suffolk and Addenbrooke's Hospital staff who completed questionnaires.

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1. Cantside and Carter, *Pharmaceutical Journal*, August 23, 1975, p168.
2. J. R. Davidson, *The Journal of Hospital Pharmacy*, August 1973, p180.

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Irish degree transferred to Trinity

The Provost of Trinity College, Dr F. S. L. Lyons, and the president of the Pharmaceutical Society of Ireland, Mr M. F. Walsh, on February 15 signed the formal agreement between their respective institutions under which, from October, 1977, a four year course in pharmacy leading to a degree examination in which honours will be awarded, will be established within the Faculty of Science in Trinity College, Dublin. This will be the only degree course leading to a professional qualification in pharmacy within the State.

The president, in a statement, said the four year degree course was an essential element in PSI's plans for expanding the role of the pharmacist in society. There were three main reasons why it was necessary to extend the basic academic course from three to four years: pharmaceutical educationalists from overseas confirmed the Society's assessment that the present syllabus was overcrowded; the new degree would satisfy EEC Directive 2 concerning the "qualified person" in manufacture of medicinal preparations, and it was anticipated that a Directive providing for the mutual recognition of pharmaceutical qualifications will be promulgated within the next two years or so. Mr Walsh added that any graduate who qualified on the basis of a three year course would be given the opportunity of reading a fourth year in the pharmaceutical sciences if he desired to comply with the "qualified person" requirements.

The overall strategy of the PSI Council was based on the concept of "unicity", which ensured that a person who merited the basic qualification was entitled to enter any of the recognised areas of practice. "In a small country like Ireland this approach makes sense economically as well as professionally." However, there were many problems to overcome, not least the inadequacy of accommodation in the short term at Shrewsbury Road.

Mr Walsh went on: "Pharmacy is now entering into a new relationship with the University of Dublin. For the first time in 100 years the Society will have no direct involvement in the provision of education. We are handing over the torch to people who are specialists."

The president also paid tribute to the attitude to the transfer taken by *An Tanaiste*, Mr Brendan Corish, and his officers in the Department of Health, and to the new Minister for Education, Mr Peter Barry and his advisers. He also put on record his thanks to UCD for its "substantial contribution" to pharmaceutical education since the first pharmacy degree in 1961 and to the Higher Education Authority for the help it also had given.



At the signing ceremony (left to right) are: seated, Mr M. F. Walsh, Dr F. S. L. Lyons, Dr W. E. Boles, standing, Professor W. A. Watts, dean of sciences, Mr M. J. Cahill, registrar, Pharmaceutical Society of Ireland, and Mr P. M. Browne, vice-president

£5,000 for Irish manager pharmacists

Implementation of a minimum commencing salary of £5,000 per annum for manager pharmacists has been approved by the National Executive Committee of the Irish Pharmaceutical Union. "Manager" pharmacists are defined as those who, in an employment situation, provide a managerial function, in addition to their primary professional functions, on behalf of employers who may be pharmacists, companies of pharmacists, non-pharmacists or companies of non-pharmacists. To qualify for the minimum commencing salary, the duties of the manager pharmacist must comply with a detailed job specification which has been drawn up.

The IPU has informed the Irish Minister for Health of its intentions to increase private dispensing fees from 50p to 60p, the new fee to comprise 57p (dispensing) and 3p (obsolescence factor). Intention to increase the fee must be given to the Minister two months in advance.

Following a meeting between IPU officers and the Health Education Bureau, posters, brochures and leaflets produced by the Bureau are to be made available to Irish pharmacies for distribution, where necessary, to their patients. "This revolutionary decision to link pharmacies with the Bureau's publicity programmes is yet another step in ensuring that pharmacies could become the local health centres of a community," says IPU. The HEB programmes have included physical education, smoking and health, alcoholism, dental health, immunisation and heart diseases.

The NEC has approved a pilot study which could lead to the design of a model book-keeping and accountancy system suitable for community pharmacies. The system would include a set of record books designed to simplify VAT and audit

returns, and a credit collection and payments system. The pilot study will involve four pharmacies and will be conducted by the Irish Productivity Centre.

The Pharmaceutical Society of Ireland and IPU have agreed that the Irish Pharmaceutical Congress 1977 will again be jointly organised by the two bodies. The venue has yet to be finalised. The IPU has been requested to nominate a number of pharmacists for working parties of FIP sections (to be held in The Hague in September) including general practice, industrial pharmacy, academic and army.

Mutual problems of doctors and pharmacists was the topic of a discussion between young doctors and IPU president. Mr Aidan O'Shea, in University College, Cork. In a report to IPU, Mr O'Shea said problem areas included doctors' ignorance of present drug schedules, repeat prescription regulations, and the backlog of unscheduled drugs "caught in the pigeon hole of antiquated legislation"; the doctors' skimpy knowledge of the pharmacist's basis of payment in the GMS Scheme (and "sheer incredulity" that it was on a cost price plus fee basis); the general feeling that the doctor needed a compact armoury of effective, safe and well-tried drugs and that many new products should be looked at with caution, and possible scepticism; the doctors expressed the view that generic prescribing was not the answer to rising drug costs. It was acknowledged that there was considerable moral pressure on the young doctor to cave in before the "shopping list" patient who demanded steroid ointments, cough bottles for children not present, and the mandatory tranquillisers for himself. "We agreed that such needless costly medication could represent perhaps 20 per cent of GMS drug costs" said Mr O'Shea.

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(MEDICINES)

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Product Description	Retail Price Per Unit incl. VAT	Standard Wholesale Price per dozen or case* excl. VAT	Product Description	Retail Price Per Unit incl. VAT	Standard Wholesale Price per dozen or case* excl. VAT
Beecham's Powders Standard 8's	29p	2.46	Germolene Standard	30p	2.54½
Beecham's Powders Large 19's	50p	4.24½	Germolene Large	46p	3.90½
Beecham's Powders 60's	5p	2.12*	Germolene Tube	30p	2.54½
Beecham's Powders Tablets 16's	29p	2.46	Germolene Medicated Footspray (120g)	47p	3.99
Beecham's Powders Tablets 40's	50p	4.24½	Germolene Medicated Plasters	■ 30p	2.54½
Beecham's Powders & Hot Lemon 5 schts	34p	2.88½	Germolene New-Skin	30p	2.54½
Beecham's Powders & Hot Lemon 10 schts	57p	4.84	Germoloids Suppositories Standard	35p	2.97
Beecham's Powders & Hot Lemon 30 schts	9p	1.91*	Germoloids Suppositories Large	65p	5.52
Phensic Tablets 24's	32p	2.71½	Germoloids Ointment	35p	2.97
Phensic Tablets 50's	44p	3.73½	Germoloids Moist Toilet Tissues	■ 32p	2.71½
Phensic Tablets 100's	70p	5.94	Veno's Standard 75ml	35p	2.97
Phensic Tablets strip 6's	10p	2.54½*	Veno's Large 135ml	49p	4.16
Nurodol Standard 12 Tablets	25p	2.12	Veno's Honey & Lemon Standard 75ml	35p	2.97
Nurodol Large 24 Tablets	44p	3.73½	Veno's Honey & Lemon Large 135ml	49p	4.16
Cephos Powders 8's	29p	2.46	Mac Lozenges Tube	11p	0.93½
Cephos Tablets 16's	29p	2.46	Mac Lozenges Carton	24p	2.03½
Phosferine Tablets Standard	24p	2.03½	Mac Honey Lem. Lozenges Tube	11p	0.93½
Phosferine Tablets Large	41p	3.48	Mac Honey Lem. Lozenges Carton	24p	2.03½
Phosferine Liquid Large	41p	3.48	Night-Nurse ♦	79p	6.70½
Yeast-Vite Standard	25p	2.12	Clear Night ♦	49p	4.16
Yeast-Vite Large	49p	4.16	Beecham's Pills Standard	24p	2.03½
Phyllosan Standard	44p	3.73½	Beecham's Pills Large	43p	3.65
Phyllosan Medium	66p	5.60½	Beecham's Pills Envelope	9p	1.53*
Phyllosan Large	130p	11.03½	Fynnon Salt	29p	2.46
Iron Jelloids Standard	50p	4.24½	Fynnon Calcium Aspirin Standard 24's	32p	2.71½
Iron Jelloids Large	81p	6.87½	Fynnon Calcium Aspirin Large 48's	52p	4.41½
Eno 'Fruit Salt' 10 schts	27p	2.29	Ellimans Universal/Royal Embrocation		
Eno 'Fruit Salt' Standard	39p	3.31	Standard 70ml	26p	2.20½
Eno 'Fruit Salt' Large	64p	5.43½	Large 110ml	37p	3.14
Dinneford's Gripe Mixture	28p	2.37½	A & P infants' Powders	24p	2.03½
Maclean Indigestion Tablets 22's	25p	2.12	Badedas Sachet 1 Bath Size 12g	■ 16p	1.29
Maclean Indigestion Tablets 44's	42p	3.56½	Badedas Tube 5 Bath Size 60g	■ 63p	5.07½
Maclean Indigestion Powders Large	42p	3.56½	Badedas Bottle 10 Bath Size 130g	■ 119p	9.58½
Setlers Tablets 30's	24p	2.03½	Badedas Bottle 25 Bath Size 315g	■ 283p	22.79½
Setlers Tablets 50's	36p	3.05½	Badedas Bottle 75 Bath Size 945g	■ 683p	55.02
Setlers Roll 10's	10p	1.70*			
Diocalm Tablets 48's ♦	43p	3.65			
Diocalm Tablets 88's ♦	70p	5.94			
All Fresh Clean-Up Squares	■ 29p	2.46			
All Fresh Baby Bottom Wipes	■ 29p	2.46			

■ PRICE MAINTENANCE - Fixed prices for all above products except those marked

♦ Sale is restricted to persons lawfully conducting a retail Pharmacy business and Wholesalers registered to deal with drugs referred to in Schedule 1 of the Misuse of Drugs Regulation 1973.

* Prices are quoted per case for products marked

VALUE ADDED TAX - All case terms prices are subject to the addition of 8% V.A.T.

Owner and manager 'should have equal responsibility'

The concept of "superintendent pharmacist" should be abolished and replaced by a PPR—the "pharmacist with whom the premises are registered"—believes Mr R. G. Worby, member of the Pharmaceutical Services Negotiating Committee.

In this way proprietor and manager pharmacists could be made equally responsible for every aspect of their professional practice, he told Anglia Branch, Joint Boots Pharmacists Association, recently. He criticised the apparent difference in ethical status between owner and manager as a threat to the unity and security of the profession at general practice level. This difference lay in the extent to which the pharmacist was free to exercise his professional judgment in the discharge of his responsibilities.

Ethical issues

It was incongruous that there should be dialogue between the Pharmaceutical Society and any company on ethical issues, Mr Worby explained, because the company was simply an investor in the commercial aspect of an enterprise. When a proprietor borrowed all his investment from a bank there was never any dialogue between the bank and the Society—the pharmacist was the only responsible person so far as the Society was concerned. If a newspaper carried an unethical article about a pharmacist the Society did not enter into negotiation with the editor but the pharmacist had to answer for allowing the paper to publish the article. Here again the pharmacist was the responsible person, but not so the multiple manager. Nor was the manager required to appear before the Service Committee.

The proprietor who did not own his capital was responsible to the person or organisation whose investment it was and his accounts had to show that the investment was secure, Mr Worby continued. For the same reason the multiple manager had to keep his business prosperous to satisfy his directors and the shareholders. Likewise both manager and proprietor should be identically responsible for every aspect of the conduct of their professional practice both to the Family Practitioner Committee and to the Society.

"Then, and only then, could we have done with the nonsense of striking a company from the Register of authorised sellers of poisons—or the even more patently ridiculous spectacle of striking a building off the Register of premises. Quite apart from the fact that the directors can buy a new company off the shelf for a mere £50.00—or if premises are the problem can buy the lease of the greengrocer two doors further down the street—how can Galen's name can a company or a building commit a breach of ethics? It isn't even alive!" said Mr Worby.

The solution lay in ensuring that the pharmacist practising in the premises was fully responsible for everything done there, or done elsewhere in connection with the conduct of those premises. It could be achieved simply by abolishing the concept of the superintendent pharmacist in favour of the PPR.

"And in case any territorial general manager or national or regional superintendents are feeling shivers of redundancy down their spines let them be reassured that their jobs would remain for all practical purposes exactly as they are now—to supervise the deployment of capital, labour and professionals and thus ensure that the business remained prosperous and the investment secure," he added.

The PPR would be the only person with whom the FPC or Society would need to talk. To the FPC that manager would be a contractor. To the company behind him he would be an agent. His salary and commissions would still be negotiated as now, but his contract would contain the clause that the NHS remittance should be banked directly and intact with the company.

In the smaller multiple, the PPR would assume full responsibility for the whole of the enterprise. If the establishment were larger, an assistant pharmacist would run the dispensary, in which case his relationship with the PPR would be identical with that of the current manager to the superintendent, because the PPR would be present on the premises all the time. If the establishment were larger still the "department store" aspect might be in hands other than those of the PPR, the company choosing whether such hands were those of a pharmacist or a highly trained retail executive for the company. But if the PPR were to be relieved of responsibility for the day to day conduct of the retail activity, two pre-conditions would apply—the "pharmacy" section would have to be separate from the rest of the store and it would still be incumbent upon the PPR to call a halt if the store's conduct rendered the environment for the pharmacy unethical.

Professional indemnity

If anything went wrong, however, that PPR would be entirely responsible, as was the proprietor today. He would have professional indemnity—preferably independently of his company organisation—and he would have a clause in his contract indemnifying him against any financial withholdings made by an FPC in respect of any breach of contract.

Mr Worby foresaw two sources of opposition. Firstly the companies themselves would fear loss of control, but such fears would be groundless. There would be less pressure on them because the PPR, unlike

the superintendent, would not need to be a director. Since the superintendent today had no power of veto other than by resigning and being replaced by a puppet superintendent, this would be no loss to the Society or the company. The individual PPR would have a better power of veto by resignation and the board could be constituted entirely as suited the shareholders.

Managers might be daunted by the prospect of full responsibility, but Mr Worby thought that any pharmacist currently managing registered premises who felt such a lack of confidence in his professional capacity was misplaced. Both that pharmacist and the public would be better protected if he operated as an assistant to a colleague carrying the responsibility of PPR in a larger establishment.

Companies other than those represented by the Company Chemists Association or the Co-operative movement would have their say on local Pharmaceutical Committees and the PSMC through the pharmacists appointed as PPRs. The employee pharmacist who often complained that his representation on the LPC was not enough would have the same access to the PSNC and thus to negotiation as his proprietor colleagues. The Company Chemists Association and the Co-ops would still have the privilege of nomination if they so wished.

Westminster Report

Out-patient prescriptions

In the House of Lords, Lord Winstanley asked whether the government will arrange for an appropriate transfer of finance from Family Practitioner Committee funds to the hospitals concerned in respect of prescriptions issued by hospital doctors to out-patients for whom continued clinical responsibility rests with the hospital doctor. Lord Wells-Pestell replied that there is no provision for transfer of funds for out-patients' prescriptions dispensed other than in a hospital pharmacy, since an allowance is made in the financial allocations to health authorities.

Cosmetics testing Bill

The Cruelty to Animals Bill, introduced into the Lords by Baroness Phillips on Tuesday, was effectively defeated when the House supported the Earl of Halsbury's amendment that it should be read a second time in six months. The Bill was directed against the use of animals in the testing of cosmetics.

Tobacco substitutes

Mr Roland Moyle, Minister of State for Health, said in a Commons written answer that the government intend to introduce legislation in the next session to bring smoking products containing tobacco substitutes and additives within the Medicines Act 1968.

□ Mr Geoffrey Rippon and other Conservative MPs have tabled a Parliamentary motion urging the Government not to agree to any arrangements under the EEC's sixth directive which would fix the VAT threshold limit at any level below at least £10,000.

Company News

Unichem sales up 47 per cent at £53m

Unichem report a 47 per cent rise in sales to over £53m for 1976 (£36m). Managing director, Mr Peter Dodd, anticipates that profits before rebate will reflect at least a similar percentage growth. A major factor in the success was the additional turnover directly attributable to the computerised ordering and invoicing system WOLF—warehouse on-line facilities—which became operative at all branches during the past year.

The board has approved payment of a second 5 per cent interim rebate to members, and it is forecast that the basic rate for 1976's total qualifying purchases will be a record 6 per cent. Payment of rebate cheques to members will start towards the end of March.

Polaroid sell over 6m instant cameras in 1976

Worldwide sales of Polaroid Corporation in 1976 were a record \$950m, 17 per cent above the 1975 figure, and net earnings at \$79.7m were also a record and 27 per cent above 1975. The president, Mr William J. McCune, speaking at a New York press conference, said: "We sold more than 6m instant cameras in 1976, more than in any previous year. Film unit sales also set a record of almost 165m units."

During 1976 sales of the SX-70 system increased about 50 per cent, while sales of the Colorpack system "held about even". The company is currently testing several new SX-70 film features, including greater colour brilliance and faster full colour development.

Mr McCune said that early in February Dr Edwin H. Land, Polaroid's chairman and director of research, had been awarded his 500th US patent "for a more powerful film pack battery that will supply power for new electronic camera accessories such as automatic light sources".

Kodak chairman more optimistic for future

In his annual statement the chairman and managing director of Kodak Ltd, Mr Jim Moorfoot, says: "We have had a good year on which to build, so I think we can allow ourselves to feel a lot more optimistic than we could a year ago". Sales by Kodak Ltd and its subsidiaries reached £183m in 1976, an increase of 25.8 per cent over 1975, and exports from the UK were up by 44 per cent to a record £64.3m. Pre-tax profit rose 55.6 per cent to £28.5m.

The volume of products sold increased overall by 8 per cent, with exports rising 20 per cent in volume terms and home

Jim Canning, managing director of Barclays, explains the new computer system at an open night for customers at the recently refurbished Croydon depot. The invoicing system, based on a mini-computer sited in the depot, provides for order entry through VDU with instantaneous response time and the immediate ability to check stock availability. It automatically provides stock and buying data as well as the normal

accountancy systems, and also produces controlled drug records. The Croydon installation is the first of a series to be spread throughout the network of Barclays depots over the next two years



sales 3 per cent. Mr Moorfoot points out that these results were achieved "against the odds, since the growth was not mirrored by an expanding economy or by increased consumer spending". Although the declining value of sterling gave "an extra boost" to the company's exports, it caused "a further worrying increase" in raw materials and other costs. Capital expenditure of about £15m is planned for 1977.

Albright & Wilson make record profit

Turnover of Albright & Wilson Ltd was £285.3m in 1976 compared with £227.3m in the previous year, and pre-tax profit was a record at £31.6m (£18.5m in 1975, which was a depressed year for the company). In the UK business was good in most sectors, with exports particularly strong, though trading conditions in agricultural chemicals were difficult.

In Canada the profit from industrial phosphates was considerably reduced but the pulp and paper chemicals business improved, particularly sales of sodium chlorate. In other overseas markets there was generally an improvement in profits, but recovery was slow in Europe.

□ ERCO Industries, A & W's Canadian subsidiary, are to build a plant in the USA with a capacity of 50,000 tons of sodium chlorate a year for the pulp and paper industry. In Australia A & W have acquired all the shares of Parbury Foods, costing £560,000, and major site improvements are to be made at the Bush Boake Allen (Australia) flavours and fragrances division of Mentone, near Melbourne.

Briefly

Wella are building a central warehouse in the industrial area of Darmstadt, West Germany, at a cost of about £6.5m. Construction is expected to be completed early in 1978. A new distribution system will then come into operation, giving quicker and more efficient deliveries for the German home market.

Willows Francis Ltd increased their pre-tax profit in the six months to December 31, 1976, by 58 per cent to £143,714, compared with £90,919 in the last half of 1975. Turnover had increased by only 7 per cent, however, to £1,124,194.

Gillette Co report a pre-tax profit rise of 2 per cent to \$149.3m in 1976 on sales 6 per cent higher at \$1,491.5m, but net profit was down 3 per cent. Sales of Gillette North America were up slightly and operating profit was higher, but the operating profit of Gillette International was well below that for 1975 although sales were a little higher.

Hoffmann-La Roche announce that the Danish Monopolies Court has revoked price reduction orders on Librium and Valium. In June 1976, a 20 per cent cut had been ordered in their prices, as well as those of competitive products also containing chlordiazepoxide and diazepam. Two Danish firms and Hoffman-La Roche contested the order.

Appointments

Cadbury Schweppes Ltd: Mr Vincent Paul Manze has been appointed personnel manager for the health and chemicals division.

Richards & Appleby Ltd: Mr Derek Harris, the former marketing manager has been appointed to the board and is responsible for UK sales and marketing. He has been with the company since 1975.

Fassett and Johnson Ltd: Mr A. C. Thomas has been appointed marketing co-ordinator. He has had some 15 years' experience in the toiletries industry and rejoins Fassett and Johnson as part of their expansion programme.

International Chemical Co Ltd: Mr Robert N. Honeybourne has been appointed assistant to the chairman and managing director. He joins the company from Personna International UK Ltd where he was marketing manager responsible for both home and overseas markets.

Market News

Borax, boric acid rise

London, February 23: The schedules for borax and boric acid have risen again. The E.P. grades of borax are up by £14 to £18 per metric ton according to form required, while the various forms of boric acid are dearer by between £20 and £26. One of the large suppliers has discontinued borax in crystalline form. A number of other pharmaceutical chemicals have been advanced, including choline, cinchocaine, lignocaine, sulphacetamide and stilboestrol.

The market for spices was quiet during the week largely because of the Chinese New Year's holiday. Spot pepper prices were fractionally dearer.

Most essential oils were little changed on the week but Brazilian peppermint and sassafras were easier on the spot.

Pharmaceutical chemicals

Acetic acid: 4-ton lots, per metric ton delivered—glacial BPC £257.50, 99.5 per cent £245.50; 80 per cent grade, pure £226, technical £211.50.
Acetomenaphthone: 100-kg lots, £0.64½ kg.
Amylobarbitone: Less than 100-kg lots £9.08 kg, sodium £10.56.
Ascorbic acid: (Per kg) £7.00; 5-kg £6.00; 25-kg £5.50 sodium ascorbate, plus 6p, coated, £7.19, £6.19, £5.69 respectively.
Atropine: (Per kg in ½-kg lots) Alkaloid £109.10.
Benzolic acid: BP for 500 kg lots £0.5901 kg in lots of 50-kg.
Biotin: £6.78 g; £5.48 g in 25-g lots.
Borax: EP grades, 2-4 ton lots per metric ton in paper bags, delivered—granular £199; powder £217; extra fine powder £222.
Boric acid: EP grades per metric ton in 2-4 ton lots for British material—granular £255; crystals £342; powder £277.
Butabarbital: 50-kg lots £11.84 kg; sodium £13.01.
Butobarbitone: Less than 100 kg, £11.24 per kg.
Calciferol: (Per kg) £46.00; 5-kg £45.00.
Calcium carbonate: BP light £125 metric ton.
Calcium lactate: 250-kg lots £412 metric ton.
Calcium pantothenate: £7.29 in 25-kg lots.
Carotene: Suspension 10 per cent £31.25 kg; 5-kg £30.25 kg. Crystalline £179.67 and £178.67 respectively.
Choline: (500-kg lots) bitartrate £2.25 kg, dihydrogen citrate £2.08.
Cinchocaine: Base (5-kg lots) £73.18 kg; hydrochloride £69.89.
Clioquinol: USP XVII 500-kg lots, £12.37 kg.
Cyanocobalamin: £3.48 g; £2.48 g in 100-g lots.
Cyclobarbitone: Calcium £11.29 kg in 25-kg lots.
Dexpanthenol: (Per kg) £11.73; 5-kg £10.73.
Dextromethorphan: £156.75 kg in 5-kg lots.
Folic acid: (Per kg) £45.50; £44.50 in 5-kg lots; £44.00 in 25-kg lots.
Formic acid: per metric ton delivered in 4-ton lots, 98 per cent £281; 85 per cent £235.
Hypophosphites: £ per kg

	12½-kg	50-kg
Calcium	3.07	2.94
Iron	5.72	5.58
Magnesium	4.87	4.48
Manganese	6.12	5.72
Potassium	4.20	4.06
Sodium	3.48	3.14

Hypophosphorous acid: (50-kg lots) Pure 50 per cent £3,175; BPC (30 per cent) £2,467.
Hydroquinone: One-ton lots £2.43 per kg; 500-kg £2.52 kg.
Kaolin: BP natural £109.90 per 1,000 kg; light £114.90 ex-works in minimum 10-ton lots.
Lignocaine: (25-kg) base £10.25 kg; hydrochloride £10.29.
Mercurials: Per kg in 50-kg lots; ammoniated £6.70; oxides—red £7.90 and yellow £7.65; perchloride £5.50; subchloride £7.00.
Paraffins: Liquid BPC heavy, 1-5 drum lots £0.393 per litre, 6-drums £0.389, in bulk £0.349; light £0.357, £0.353 and £0.313 respectively. Technical white oils per litre for similar lots—WA23 £0.33, £0.326 and £0.286; WA21 £0.344, £0.34 and £0.30 respectively. Petroleum jelly BP soft white £358-£470 metric ton as to grade, delivered UK; yellow £342-£444.

Pentobarbitone: Less than 100-kg £14.69 kg, sodium £15.88.
Phenobarbitone: In 50-kg lots £10.89 kg; sodium £11.91.
Stilboestrol: BP in 25-kg lots, £109 kg.
Sorbitol: Powder £450 metric ton; syrup £225.
Strychnine: Alkaloid £60.00 per kg; sulphate and hydrochloride £45.00 kg, 5-10 kg lots, nominal.
Succinylsulphathiazole: £487 kg (50-kg lots).
Sulphacetamide sodium: BP 7.25 kg for 50-kg.
Sulphamethizole: £6.71 kg in 1,000-kg lots.
Sulphaquinoxaline: BVetC in 50-kg drums £8.05 kg; sodium salt £9.10.
Theophylline: Hydrate and anhydrous £3.41 kg in 100-kg lots. Theophylline ethylenediamine £3.66 kg under 50-kg lots.
Thiamine hydrochloride: Per kg £15.47; 5-kg £14.47; 25-kg £13.97; mononitrate plus 30p per kg.
L-Thyroxine: £1.70 per kg.
Tocopherol: DL alpha £17.50 kg; 5-kg £16.50 kg.
Tocopheryl acetate: DL alpha (per kg) £15.53; 5-kg £14.53; Dry 25 per cent £15.12 and £14.12 respectively.
Vitamin A: (Per kg) acetate powder 500 iu; £13.93; £12.53 in 5-kg lots. Palmitate, oil 1 miu £14.20; 5-kg £13.20. Water-miscible 100,000 iu per mm, 6-litre lots £4.80 litre.
Vitamin D2: See calciferol.
Vitamin E: See tocopheryl acetate.

Crude drugs

Agar: Spanish-Portuguese £5.50 kg spot.
Aloes: Cape £1.37 kg spot; £1.30, cif. Curacao no spot; shipment £1.87, cif. March-April.
Balsams: (kg) Canada: £11.60 spot; £11.50, cif. for shipment. **Copaiba:** BPC £2.25 on the spot; £2.15, cif. **Peru:** £6.30 spot; £6.20, cif. **Tolu:** £3.80 spot.
Belladonna: (metric ton) Leaves £1,650 spot; £1,600, cif. Herbs no offers. Root £1,400.
Benzoin: BP £89.00-£90.00 cwt spot; £88.00-£89.00, cif.
Buchu: Rounds £2.35 kg spot; £2.15, cif. new crop March-April.

Coming events

Sunday, February 27

British Small Animal Veterinary Association, Memorial Hall, Old Windsor, Berks, at 2.30 pm. Symposium on "The problems of the older dog".

Monday, February 28

Enfield Branch, Pharmaceutical Society, Winchmore Hotel, London N21, at 6 pm. Working dinner, speaker, Mr W. Darling, member of Council.
Harrow Branch, Pharmaceutical Society, Northwick Park Hospital, clinical lecture theatre, at 8 pm. Judith Bryant on "Nursing and the home care of the elderly patient".

Tuesday, March 1

Chelmsford Branch, Pharmaceutical Society, Chelmsford & Essex Hospital, academic unit, at 8 pm. Dr C. Roberts on "The work of the Life Sciences Research Institute".
Stockport Branch, Pharmaceutical Society, Alma Lodge Hotel, Stockport, at 8 pm. Dr J. C. Dearden on "Designing new drugs from physico-chemical principles".

Wednesday, March 2

Bristol Branch, Pharmaceutical Society, Holiday Inn, Lower Castle Street, at 7.30 pm. Annual dinner and dance.
Chiltern Region, Pharmaceutical Society, Himsforth Hall, Northwick Park Hospital, at 8 pm. Dr L. G. Goodwin on "Science at the zoo".

Medway Branch, Pharmaceutical Society, Joyce Green Hospital, Dartford, at 7.30 pm. Third in series of postgraduate lectures on diabetes by Dr P. J. Watkins.

Small business conference, Caxton Hall, London SW1, 4 pm-9 pm (fee £1, with meal £3). Details from Conservative Small Business Bureau, 32 Smith Square, London SW1P 3HH.

Thursday, March 3

Biological Methods Group, Chemical Society, National Institute for Biological Standards and Control, London, at 2.30 pm. Subject: "The control of influenza vaccines".

Bradford and Halifax Branch, National Pharmaceutical Association, Victoria Hotel, Bridge Street Bradford, at 8 pm. Mr Donald Royce on "New approaches to old problems".

Ealing Branch, Pharmaceutical Society, Tripartite dinner at Red Lion Hotel, Hounslow, at 7.30 pm. Speaker, Mr J. P. Kerr on "Forty years of pharmaceutical folly".

Ginger: (ton, cif) Cochin £1,090. Jamaican (spot) £1,500. Nigerian split £860 spot, shipment £830, cif, peeled £990.
Illicacuanha: (kg) Costa Rica £4.25 spot, £4.20, cif.
Liquorice root: Chinese £400 metric ton, cif. Russian £330 spot; £300, cif. Block juice £147 per 100 kg.
Menthol: (kg) Brazilian from £10.00 spot, £10.70, cif. Chinese from £12.50 duty paid; £11.20, cif.
Nutmeg: (per ton, fob) Grenada 80's £1,650, unassorted £1,490; defectives £1,250.
Nux Vomica: £210 metric ton spot.
Pepper: (ton) Sarawak black £1,420 spot, £1,320, cif. White £1,620 spot; shipment £1,515, cif. Brazilian black grade one £1,395, cif.
Seeds: (metric ton, cif) **Anise:** China star forward £620. **Caraway:** Dutch £940. **Celery:** Indian £590. **Coriander:** Moroccan £650; Indian £550. **Cumin:** Egyptian £500, Iranian £535. **Dill:** Indian £265. **Fennel:** Egyptian £230. **Fenugreek:** £145.
Senega: (kg) Canadian £14.60 spot; no cif.

Essential and expressed oils

Almond: Sweet in drum lots £1.25 kg duty paid
Anise: (kg) £17.50 spot and cif.
Bols de rose: (kg) No spot; shipment £7.50, cif.
Cedarwood: Chinese £1.10 kg spot; £1.20, cif.
Lavender spike: £12.50 kg, cif.
Peppermint: (kg) Arvensis—Brazilian £5.20 spot, £5.25, cif. Chinese £5.20 spot and cif. Piperata. American Far West about £24.50, cif.
Sage: Spanish £12.00 kg, cif.
Sandalwood: Mysore small lots quoted about £100 kg spot. No cif offers. East Indian £95.00.
Sassafras: Chinese £2.20 kg, cif. Brazilian £2.15 kg spot and cif.

The prices given are those obtained by importers or manufacturers for bulk quantities and do not include value added tax. They represent the last quoted or accepted prices as we go to press.

East Metropolitan Branch, Pharmaceutical Society, La Taverna, Epping, at 7.30 pm. Annual dinner and dance.

Hastings and District Branch, National Pharmaceutical Association, Postgraduate Medical Centre, Holmesdale Gardens, Hastings, at 8 pm. Mr W. A. G. Kneale on "A fresh look at general practice pharmacy in the EEC".

Society of Cosmetic Chemists of Great Britain, Royal Society of Arts, London WC2, at 6.30 pm. Medal lecture, Professor R. J. L. Allen on "Cosmetics and the future".

Sunderland Branch, Pharmaceutical Society, Sunderland Polytechnic, room L132, at 8 pm. Professor Arnold Beckett, Chelsea College, University of London, on "Dopa in society and sport and some methods for its control". The date of this meeting was wrongly stated in last week's issue.

Friday, March 4

Pharmaceutical Marketing Club, London Room, New London Centre, Parker Street, Drury Lane, London WC2, at noon. Dr Elston Grey-Turner, secretary, British Medical Association, on "The attitude of the BMA towards the advertising of human medicines". (Lunch £6.) Details from Mrs Jean Hicks, Henderson Group One, 1 Roberts Mews, Loundes Place, London SW1X 8DA.

Advance information

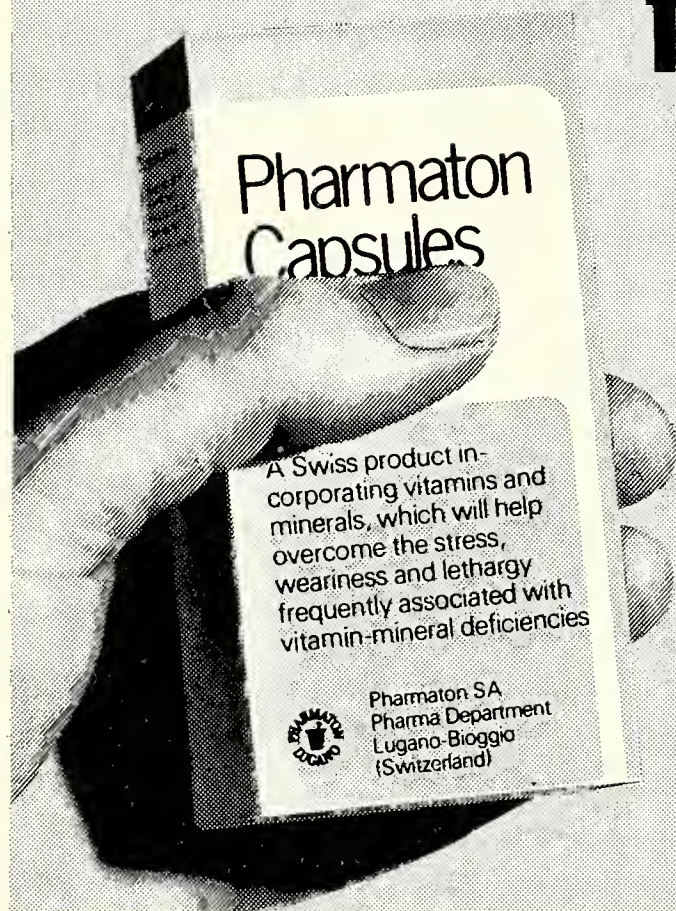
British Society for the History of Pharmacy. Conference on "Medicine and pharmacy in Kent", Eliot College, University of Kent, Canterbury, March 25-27 (fee £24 residential, £2.50 per day non-residential, £3.50 Saturday evening dinner only). Applications to the secretary, BSHPh, 36 York Place, Edinburgh EH1 3HU, by March 9.

Croydon Branch, Pharmaceutical Society, working dinner, Greyhound Hotel, Carshalton, Surrey, April 15, at 7.15 pm. Dr D. H. Maddock, vice-chairman of the NPA on "Matters of current interest in pharmacy".

National Association of Women Pharmacists. Conference on "Women in pharmacy '77". Portsmouth Polytechnic, Rees Hall of Residence, Southsea Terrace, Southsea, Hants, April 2-3 (fee Saturday only £4, Sunday only £5, full course £11). Includes refresher course open to all pharmacists. Applications to Mrs J. Brierley, 36 Seamead, Stubbington, Hants, by March 14.

Foyal Institute of Chemistry. Symposium on "Scientific manpower planning for the 80s". Bloomsbury Centre Hotel, Coram Street, London WC1, March 29-30. Details from Dr I. R. McKinley, R1C, 30 Russell Square, London WC1.
University of Nottingham, department of pharmacy. Open evening to mark the official opening of the new pharmacy building by the president of the Pharmaceutical Society, March 22 7.00-10.00 pm. All past graduates and friends of the department are invited.

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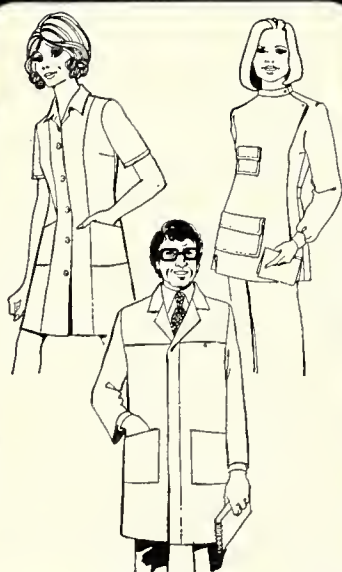
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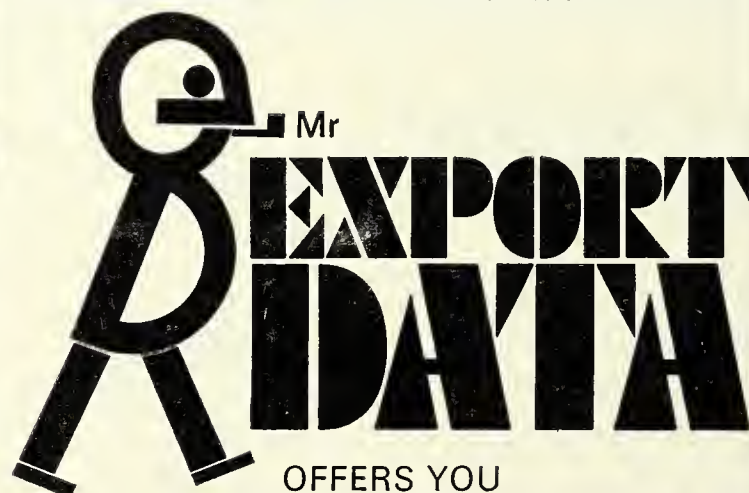
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